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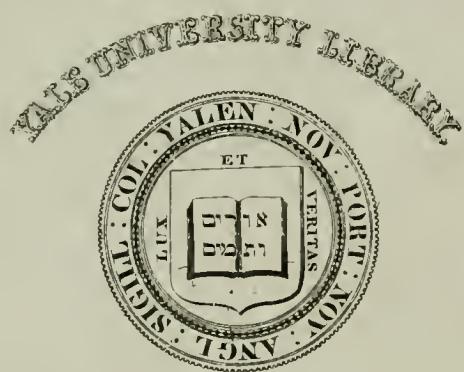
ON THE  
Construction and Revision  
OF THE  
BY-LAWS  
OF THE  
Retreat for the Insane  
At Hartford, Conn.

WITH  
LETTERS

On Hospital Organization and Government.

PRINTED FOR PRIVATE USE.

HARTFORD, CONN.:  
1873.



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Mrs. Charles L. Ives

1893

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ON THE

# Construction and Revision

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## BY-LAWS

OF THE

# Retreat for the Insane

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[J. H. Denny]

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## PREFATORY NOTE.

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THE following letters are printed simply to permit of more convenient reference, and a readier appreciation of the subject discussed than could have been obtained from manuscript.

RETREAT, HARTFORD, CONN.,

JUNE 6, 1873.



# LETTERS

ON THE

## Construction of the By-Laws

OF THE

## Retreat for the Insane.

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HARTFORD, CONN.:

1873.



RETREAT, HARTFORD, CONN., Dec 3, 1872.

MR. F. B. COOLEY,

*Chairman of the Board of Managers.*

*My Dear Sir:*

I have just received the official announcement of my election to the office of Superintendent of the Retreat for the Insane.

I consider it to be my plain duty, before returning a formal answer to that communication, to request of you to furnish me with a letter of instruction, embodying in unqualified language the verbal explanations which were kindly given me by the gentlemen of the Board of Managers, of the exact significance of the By-Laws that accords with the expressed sentiment of the Honorable Board.

I adopt this course in order to be enabled to assure the harmonious action of all persons having responsibility confided to them in the management or operation of the affairs of this venerable institution.

The By-Laws, adopted Nov. 17th, 1835, simply defined the duties of the Superintendent to be those of a Physician, to whom should be confided the medical and moral treatment of the patients.

In consequence of this limited definition of the extent of the authority of the Superintendent, dissensions, and clashing of functions inevitably arose be-

tween the Superintendent and Steward, during the terms of service of Drs. Todd and Fuller.

The so-called "Retreat Difficnlty," well known to all familiar with the history of the institution, originated on this account. Dr. Woodward, who was elected the successor of Dr. Fuller, declined to accept the responsibility from this same cause.

The Directors having recognized in the action of Dr. Woodward the fact that any division of responsibility in the management of the institution would render the harmonious and efficient co-operation of the officers of the Retreat impracticable, voted, March 19, 1840, that Drs. Sumner and Fuller be a committee to revise the By-Laws of the Retreat, and that they be instructed so to alter them as to place the government of the institution entirely under the control of the Superintendent.

In accordance with this decision, the By-Laws were revised, and the following rules for the regulation of the officers of the institution were adopted, March 31, 1840 :

"The Superintendent shall take charge of the institution \* \* \* and to him shall be confided the medical and moral treatment of all the patients admitted into it, and the control of all persons therein, subject to the regulations of the Directors." \* \* He is "to advise with the Managers respecting the financial operations of the institution." In reference to the duties of the Steward, the revised By-Laws state that "by the direction of the Superintendent in each case, and not otherwise, he shall hire attendants and domestics, and agree with them respecting wages, and by

like direction, and not otherwise, shall dismiss them and settle their accounts; and he shall perform such other duties, relating to the patients and the government of the institution, as shall be required of him by the Superintendent."

If it was intended to give the Superintendent supreme authority, subject of course to the Directors, no plainer language could be used.

In the 16th Annual Report, of 1840. the Directors state that "the Superintendent is the head of the institution, and is responsible for its management."

Believing that individual responsibility is, on the part of a Superintendent, rendered negative when any part of the management of an institution may be exclusively and independently entrusted to the care of a subordinate, however competent and experienced he may be, I have concluded to ask of you whether I am correct in enumerating the threefold exceptions taken by the gentlemen of the Board, to that portion of the By-Laws which extends the functions of a Superintendent over "all persons," as well as over the financial concerns, subject to the Directors, and in considering them as official?

*First.* "The control of the Superintendent does not include the direction of those persons whose duties are defined by the By-Laws," including thereby the Steward, Matron, Apothecary and Chaplain.

*Second.* "The authority of the Superintendent does not extend over persons employed outside of the institution," including farm and laundry employees, engineer, fireman, carpenter, etc.

*Third.* "The duties of the Superintendent do not include supervision of matters of finance," including the purchasing of supplies.

As the By-Laws at present seem to indicate, the duties of the Superintendent are inseparably interwoven in the management of every department, since every department is directly or ultimately designed to promote the comfort, health or safety of the patients entrusted to his exclusive control.

If the Superintendent is the head of the institution, and responsible for its management, it would appear to follow that *through him* alone all instructions and directions should be transmitted to all the officers, thus permitting him to exercise his responsibility over the management independently, subject of course to the regulations of the Directors, and allowing him to delegate his authority as in his opinion may best conduce to the interests of the institution.

I trust you may not think that I am unwarrantably proposing unnecessary questions at an unfortunate time, but feeling that any exceptions to the rendering of the By-Laws should be plainly defined in unqualified language, and authoritatively ratified if decided upon, in order to avoid any misinterpretations or doubts, with their inevitable consequences, I have at the very outset laid the subject open for decision, as a most obvious duty to the Retreat and to myself.

I remain very respectfully,  
Your obedient servant,  
JAMES H. DENNY,  
*Acting Superintendent, Retreat for Insane.*

HARTFORD, Dec. 16, 1872.

*James H. Denny, M. D.:*

*Dear Sir:*

Your communication of the 3rd Dec., inst., to the chairman of the board of Managers, referring to an informal interview with the Board at the Aetna Bank prior to the approval of your nomination as Superintendent by the Board of Directors, has been received, laid before the Board of Managers, and received their careful consideration. The Board have no power officially to decide any of the questions propounded; and in that respect, therefore, you are to understand that the views heretofore, and now, expressed have no official binding force. This negation of power fully answers your inquiry, whether you are correct in considering the views then expressed of the By-Laws as official.

Though we have no power in this regard, other than every other Director possesses, yet as you desire our views as heretofore expressed to be reduced to writing, we will, without setting forth the By-Laws, with which you are quite familiar, in support of our views, as concisely and distinctly as possible answer the questions propounded.

In answer to the first we reply, that the By-Laws were intended to provide for the appointment by the

Directors of certain persons to fill certain departments in the Retreat, and define the duties required to be performed by each. The Superintendent was then put in charge of the house and the medical and moral treatment of the patients. He became the chief executive officer, with nobody above him, or to supervise him, or in any wise command, direct or control him, and accountable to no one except the Directors, who created him ; while all others appointed to fill the other departments in the Retreat were, to a greater or less extent, subordinate to him in some of the duties required of them ; and in this respect to a certain extent he controlled all persons therein ; but this control was not an unlimited control, with “supreme authority” over the other officers appointed by the Directors to fill these other departments, and perform the duties imposed upon them by the By-Laws.

If these other officers performed faithfully all the duties which the By-Laws required of them, then their whole duty was done, and they owed no further obedience to the institution, or the Superintendent as its head. His responsibility and his authority goes no further in respect to these officers appointed by the Directors than to see that each department, in respect to the duties appropriate to that department under the By-Laws, as, either by reason of the character of the duty to be performed, or the provisions of the By-Laws, come under his supervision, is properly administered according to the rules and regulations established by the By-Laws applicable to each.

For example, the duties of the housekeeper are

carefully fixed by the By-Laws. These duties relate exclusively to the interests of the patients, and the well ordering of the internal affairs of the institution, and beyond the faithful observance and performance of these, we do not see what control the By-Laws were intended to or do give to the Superintendent.

So in relation to the other appointees, by the Directors, to whom you refer, so far as their duties relate to the comfort, health or safety of the patients, it devolves upon the Superintendent to see that these duties are properly performed.

Nobody doubts that the Superintendent may properly require the faithful performance of all this class of duties, and should there be a persistent refusal on the part of any such appointee to perform the duties which belong to him to perform under the By-Laws, though the Superintendent has no power to enforce his requirements, the Directors have, and upon a proper representation would exercise that power.

To the second, we reply that the authority of the Superintendent does extend over all the attendants and domestics, employed by him or under his direction, and that authority is absolute, and may be exercised according to the will or caprice of the Superintendent, with or without reason, and without accountability to any one for what he chooses to command or require in respect to their employment. And this necessarily extends to all persons whose employment is so directly connected with the Retreat plant, that their presence and services are required within or about the Retreat buildings and grounds, in such way and manner that

they necessarily and frequently come in contact with the patients, or the comfort, health or safety of the patients is directly connected with or dependent upon their employment. We do not understand that the Superintendent's authority in this respect embraces the farm hands and help employed for its cultivation. It is quite certain that the By-Laws were never intended to embrace this class of outside and remote help, for when in 1840 the By-Laws were adopted, the Retreat had no farm, and so far as we know had no intention of purchasing one. Should the question arise whether the Superintendent's authority embraces the engineer, fireman, &c., and such other outside help as are generally employed, under the advice and after consultation with the Board of Managers, the Board will without doubt upon proper representations in any given case, endeavor to meet the complaint.

To the third, we reply, the duties of the Superintendent do not, in our opinion, comprise the control of the finances, or include the purchasing of supplies, and we have looked in vain for any provision in the By-Laws or elsewhere, giving to the Superintendent the control of the finances of the institution; but on the contrary the management of the finances is most distinctly placed in other hands, and surrounded with all the necessary and usual safeguards for its security; and whenever the Superintendent is made the agent for the expending of money, it always has been by special vote of the Board of Directors.

The Steward is most distinctly by the By-Laws made the purchasing and disbursing agent of the Retreat,

and he is also the agent in the first instance to receive and pay over to the treasurer the moneys; and he is required to make his report monthly to the Managers of his administration of the moneys or finances of the corporation, and he alone is responsible. In the performance of the duties of his department as Steward, the cultivation and management of the farm appropriately belong to him, and this and many other things in his department of Steward, requires the employment of help, whose duties and employment is away and so remote from the Retreat premises that the Superintendent could not, if he would, exercise a supervision over them, and in the opinion of the Managers the By-Laws never intended that the Superintendent should control them. They are in no sense attendants or domestics in the Retreat, whose employment or dismissal by the Steward is dependent upon the direction of the Superintendent.

It is of the highest importance to the Retreat, that there should be the utmost harmony between all in any wise connected with it, and it will be the study of this present Board of Managers, so long as they continue in office, not only to aid in securing this harmony, but also to "render all needful assistance to the *Superintendent and Steward* in the discharge of their duties."

Regretting our inability to express more clearly or pointedly our views of the exact significance of the By-Laws of the Retreat, or more plainly or unqualifiedly to define the exact limit of each, and the control which the Superintendent may or may not exercise under the By-Laws in every supposable case, applicable

to each, and trusting that there may be no such irreconcilable difference in our views as your communication seems to indicate, calling for a more authoritative decision, we remain as individuals and as a Board, your sincere friends.

By order of the Board of Managers,

F. B. COOLEY, CHAIRMAN.

ON THE

# Revision of the By-Laws

OF THE

# Retreat for the Insane

WITH

## LETTERS

On Hospital Organization and Government.



PRINTED FOR PRIVATE USE.



HARTFORD, CONN.:

1873.



## Introductory Letter.

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*To the Directors of the Retreat for the Insane:*

GENTLEMEN,—I respectfully present herewith to the Board a communication, with letters appended, which, for convenience of reference, and a readier appreciation of the subject discussed, I have had privately printed.

The subject is one which excites general and deep interest in all those practically conversant with it. It is superfluous for me to say, in view of the recent testimony of all parties concerned, that no personal bias or prejudice is involved.

The gentlemen whose letters are presented are widely known both in and beyond the medical profession, and have had the amplest opportunities for understanding the whole matter, theoretically and practically.

Dr. Thomas S. Kirkbride, Ex-President of the Association of Superintendents, is the Superintendent of the Pennsylvania Hospital for the Insane, one of three other institutions incorporated in a manner corresponding to the Retreat, but governed on the basis of the “Propositions” referred to hereafter.

Maj.-Gen. Irwin McDowell, in command of the “Division of the South,” is so cosmopolitan that I need not

advert to the high character of his testimony concurring with the sentiments of Surgeon William J. Sloan, Medical Director of the Division of the South.

Dr. John E. Tyler, for twenty years was Superintendent of Asylums—first of the State Asylum for the Insane, Concord, N. H., then of the McLean Asylum, Somerville, Mass.—the latter having an incorporation resembling the Retreat.

Dr. Isaac Ray stands confessedly at the head of the profession in the specialty. He was for many years President of the Association of Superintendents, and for nearly thirty years was Superintendent of the State Asylum, Augusta, Maine, and of the Butler Hospital for the Insane, Providence, R. I. He is the author of “Medieal Jurisprudencie of Insanity,” “Contributions to Mental Pathology,” and of much other kindred literature.

Dr. J. P. Bancroft is Superintendent of the State Asylum for the Insane, Concord, N. H., the most completely organized State Asylum in the country.

Dr. D. T. Brown presides over Bloomingdale Asylum—the only remaining Asylum incorporated in a manner similar to the Retreat.

Dr. Henry I. Bowditch has had life long experience in connection with hospital organizations, both in this and other countries.

Dr. P. S. Conner, Professor of Surgery in the Ohio Medical College, was formerly an assistant at the Retreat, and Surgeon in the regular army.

Dr. J. W. Baetow is Superintendent of Sanford Hall, Flushing, L. I.

Dr. George F. Jelly is Superintendent of the McLean Asylum.

Dr. Edward Cowles is Superintendent of the City Hospital, Boston, Mass. He was formerly an assistant in the Retreat, and a Surgeon in the regular army.

Dr. C. H. Niehols is the Superintendent of the Government Hospital for the Insane, Washington, D. C., and Vice-President of the Association of Superintendents.

Very respectfully,

JAMES H. DENNY.

RETREAT, Hartford, Conn., May 24, 1873.



## PROPOSITIONS

RELATIVE TO THE

### Organization of Hospitals for the Insane,

UNANIMOUSLY ADOPTED AT A MEETING OF THE ASSOCIATION OF  
SUPERINTENDENTS OF AMERICAN ASYLUMS FOR THE INSANE.

MAY, 1852, AS THE OFFICIAL EXPRESSION OF THE  
SENTIMENTS OF THE ASSOCIATION.

I. The general controlling power should be vested in a Board of Trustees or Managers; if of a State institution, selected in such manner as will be likely most effectually to protect it from all influences connected with political measures or political changes; if of a private corporation, by those properly authorized to vote.

II. The Board of Trustees should not exceed twelve in number, and be composed of individuals possessing the public confidence, distinguished for liberality, intelligence, and active benevolence, above all political influence, and able and willing faithfully to attend to the duties of their station. Their tenure of office should be so arranged that when changes are deemed desirable, the terms of not more than one-third of the whole number should expire in any one year.

III. The Board of Trustees should appoint the Physician, and, *on his nomination*, and not otherwise, the

Assistant Physician, Steward and Matron. They should, as a board, or by committee, visit and examine every part of the institution at frequent stated intervals, not less than semi-monthly, and at such other times as they may deem expedient, and exercise so careful a supervision over the expenditures and general operations of the hospital, as to give to the community a proper degree of confidence in the correctness of its management.

IV. The Physician should be the Superintendent and chief executive officer of the establishment. Besides being a well educated physician, he should possess the mental, physical and social qualities to fit him for the post. He should serve during good behavior, reside on or very near the premises, and his compensation should be so liberal as to enable him to devote his whole time and energies to the welfare of the hospital. *He should nominate to the board suitable persons to act as Assistant Physician, Steward and Matron. He should have entire control of the medical, moral, and dietetic treatment of the patients, the unrestricted power of appointment and discharge of all persons engaged in their care, and should exercise a general supervision and direction of every department of the Institution.*

V. The Assistant Physician, or Assistant Physicians, where more than one are required, should be graduates of medicine, of such character and qualifications as to be able to represent and to perform the ordinary duties of the Physician during his absence.

VI. The Steward, *under the direction of the Superintending Physician*, and by his order, *should make all*

*purchases for the Institution, keep the accounts, make engagements with, pay and discharge those employed about the establishment; have a supervision of the farm, garden and grounds, and perform such other duties as may be assigned him.*

VII. The Matron, under the direction of the Superintendent, should have a general supervision of the domestic arrangements of the house; and, under the same direction, do what she can to promote the comfort and restoration of the patients.

VIII. In institutions containing more than two hundred patients, a Second Assistant Physician and an Apothecary should be employed; to the latter of whom other duties in the male wards may be conveniently assigned.

IX. If a Chaplain is deemed desirable as a permanent officer, he should be selected by the Superintendent, and, like all others engaged in the care of the patients, should be entirely under his direction.

X. In every Hospital for the Insane, there should be one supervisor for each sex, exercising a general oversight of all the attendants and patients, and forming a medium of communication between them and the officers.

XI. In no institution should the number of persons in immediate attendance on the patients be in a lower ratio than one attendant for every ten patients; and a much larger proportion of attendants will commonly be desirable.

XII. The fullest authority should be given to the Superintendent to take every precaution that can guard

against fire or accident within an institution, and to secure this an efficient night-watch should always be provided.

XIII. The situation and circumstances of different institutions may require a considerable number of persons to be employed in various other positions; but in every hospital, at least all those that have been referred to are deemed not only desirable, but absolutely necessary, to give all the advantages that may be hoped for from a liberal and enlightened treatment of the insane.

XIV. All persons employed in the care of the insane should be active, vigilant, cheerful, and in good health. They should be of a kind and benevolent disposition; be educated, and in all respects trustworthy; and their compensation should be sufficiently liberal to secure the services of individuals of this description.

Extract from the Records  
OF THE  
RETREAT FOR THE INSANE.

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At a meeting of the Directors of the Retreat for the Insane, March 19, 1840, it was

*Voted, That Doctors Sumner and Brigham be a committee to revise the By-Laws of the Retreat, and that they be instructed so to alter them, as to place the Government of the Institution entirely under the control of the Superintendent, and report to an early meeting of this Board.*

March 31st, 1840, the following *By-Laws for the regulation of the Officers of the Institution* were adopted:

**By-Laws of the Retreat for the Insane.**

**DIRECTORS.**

After the annual meeting of the Society there shall be an annual meeting of the Directors of the Retreat, on the Thursday succeeding the second Wednesday of April, at 8 o'clock P. M., at which time they shall elect three Managers, examine a statement of the annual expenditures of the Institution, and adopt such measures as they may deem expedient relating to the finances

and government of the same. At the same meeting they shall direct the publication of the annual report of the Managers, Superintendent and Treasurer.

#### MANAGERS.

The Managers shall visit the Retreat every month, at which time they shall examine the state of the house, provide for the wants of the Superintendent, Steward and patients, and render all needful assistance to them in the discharge of their duties, and adopt such regulations as are requisite for the admission and discharge of patients. They shall elect one of their number to manage the fiscal concerns of the institution, who shall be authorized to draw on the Treasurer in behalf of the Steward, and others; also have just claims on the establishment. It shall also be their duty to examine and to approve or correct the monthly reports made to them by the Steward, relating to the financial concerns of his department, and shall certify in writing that they have thus examined and approved of reports.

They shall also annually prepare for publication a full and detailed report, exhibiting a particular statement of the condition of the Institution, and of its concerns, and present the same to the Directors at their annual meeting in April.

#### SUPERINTENDENT.

This officer shall take charge of the Institution, and devote his time and services exclusively to it, and to him shall be confided the medical and moral treatment of all the patients admitted into it, *and the control of*

*all persons therein,* subject to the regulations of the Directors.

He is to advise with the managers respecting the admission and discharge of patients, and *also respecting the financial operations of the Institution*, is to keep a general registry of the patients, and a particular diary of those cases that are under treatment, detailing the history of each case, the remedies employed, and their success. He shall also conduct the correspondence with the friends of the patients, and cause copies of all such correspondence to be carefully preserved, which, together with the diary of cases, is to be at all times open for the inspection of the Directors, Managers and Medical Visitors.

He shall annually prepare for publication a report detailing the number of patients at the Retreat, the number admitted during the year, and the number of recoveries and death ; and shall embody in it such other information respecting the patients and the Institution as will enable the public to have a full understanding of the condition of the Retreat, and its success in restoring to health those admitted to it ; and he shall present this report to the Directors at their annual meeting in April.

The Superintendent shall nominate the Apothecary and the Matron, and the appointments of these officers shall be valid when approved by the Directors.

#### STEWARD.

It shall be the duty of the Steward to receive the bonds which may be accepted in behalf of each patient,

and to receive payment on them, and pay the same to the Treasurer. He shall render to one of the Managers in the course of the first week of every month a written account of the financial concerns of his department, and of his receipts and expenditures, *the latter to be endorsed by the Superintendent, and without such endorsement is not to be accepted by the Managers.* He shall, also, at such times render to the Managers a statement in writing of what remains due to the Institution, and pursue such measures as they shall direct for the collection of the same.

*By the direction of the Superintendent in each case, and not otherwise, he shall hire attendants and domestics, and agree with them respecting wages, and by like direction, and not otherwise, shall dismiss them and settle their accounts, and he shall perform such other duties relating to the patients and the government of the Institution as shall be required of him by the Superintendent.* He shall constantly notice the conduct of the attendants and domestics, *and report immediately to the Superintendent every instance of misconduct or negligence.*

#### MATRON.

The Matron shall see that the apartments for the females are kept clean and in good order, and that the lodging rooms are provided with whatever is necessary for the comfort of the patient. She is to keep an inventory of the furniture and bedding belonging to this department of the Institution, and of the apparel of the female patients, and report to the Superintendent whenever there is a deficiency of these articles. She

is \* [to attend the Superintendent in his visits to the female department, and all other persons who are admitted. She is to remain herself in the department constantly] to see that the nurses are faithful and kind, and to assist them in the discharge of their duties, and report immediately to the Superintendent any acts of remissness or improper conduct on their part.

#### APOTHECARY.

He shall constantly reside at the Retreat, and devote himself exclusively to the Institution; under the direction of the Superintendent he is to prepare and administer medicines, and to render to the Superintendent such other aid as he may require of him.

#### CHAPLAIN.

It shall be the duty of the Chaplain to conduct the religious exercises in the Institution at Evening Prayers, on the Sabbath, and on every other occasion when his services may be needed, and to have such intercourse with the patients and other inmates as the Superintendent may deem desirable for their benefit. The Chaplain may at suitable times procure the services of other clergymen at the religious exercises in the Institution, with the consent and approbation of the Superintendent.

MAY 18, 1841,—*Voted*, That so much of the By-Laws as requires the constant residence of the Matron in the Female Department be rescinded.

\*Repealed.



RETREAT, HARTFORD, CONN.,

May 1st, 1873.

*To the Directors of the Retreat for the Insane:*

GENTLEMEN :

I respectfully present herewith for your consideration, the very important question of a revision of the By-Laws of the Retreat, upon the basis of the "Propositions in Reference to the Organization of Hospitals for the Insane," unanimously adopted at a meeting of the "Association of Superintendents of American Institutions for the Insane," May, 1852, and request your official action thereon. This subject was brought before the Board of Directors in 1840, and received such candid and liberal investigation as to result in a revision of the original By-Laws enacted in 1835.

This revision was undertaken in consequence of the limited extent of authority accorded to the Superintendent in the original By-Laws, which simply defined the duties of the Superintendent to be those of a physician "to whom should be confided the medical and moral treatment of the patients."

No power to act as an executive officer was specified, and clashing of function with inevitable dissensions between Superintendent and Steward arose during the

administrations of Dr. Todd and Dr. Fuller. Dr. Woodward, who was elected to be the successor of Dr. Fuller, declined to accept the position on this account.

The Directors thus recognizing the fact that independent management of any department of the institution would render the harmonious and efficient co-operation of the officers of the Retreat impracticable, voted March 19, 1840, that "Drs. Sunner and Brigham be a committee to revise the By-Laws of the Retreat, and that they be instructed so to alter them as to place the government of the Institution *entirely* under the control of the Superintendent."

In compliance with this decision the present "Rules for the Regulation of the Officers of the Institution" were adopted, March 31, 1840. Although the revised By-Laws were thought, at that time, to have been sufficiently comprehensive and exact, a vastly greater advancee during the next twelve years in sentiment on this subject found authoritative expression, not only in the official action of the Association in 1852, but in the laws enacted for the government of Hospitals for the Insane throughout the country, excepting the Retreat and another institution.

These propositions differ radically from our present By-Laws, inasmuch as they place the "unrestricted power of appointment and discharge" in the hands of the Superintendent, and specify that he should direct *every department*, and all persons and affairs therein included.

They place under his direction the supervision of all outside employees, of the farm and grounds, and, in

short, make him unmistakably the sole responsible head of the Institution, alone accountable to the Directors.

They declare that all expenditures should be incurred under the direction of the Superintendent.

Our present By-Laws imply that the Superintendent is accountable for financial concerns, inasmuch as it is made his duty to endorse the monthly account of receipts and expenditures in order to render them valid, and they expressly state that he is to advise with the Managers about the financial operations of the institution, but are not sufficiently definite to obviate doubt.

The Superintendent, nevertheless, has always been entrusted with the fixing of the rates of admission, a very important financial concern. Indeed, to a certain extent, the financial status of the institution depends upon the kind and amount of patronage which the character and reputation of the Superintendent may be able to influence.

I have sought the opinions of eminent gentlemen connected both with the specialty, and with civil and military practice, on this question of the government of hospitals for the Insane, and append hereto letters which I have received on this point, in order to establish the fact that I am not proceeding without the endorsement of the standard authorities on this subject.

In the Sixteenth Annual Report—1840—the Directors state that the Superintendent is *the head* of the institution, and responsible for its management.

Individual responsibility, on the part of any Superintendent, is utterly impracticable whenever any part

of the management is exclusively confided to any other officer, however experienced and trustworthy he may be. I may add that neither I myself, nor, in my estimation, can any other gentleman attain that full measure of success, in the administration of the affairs of this venerable institution, which is requisite to ensure its continued prosperity, under any other plan than that which recognizes the *entire control* of the Superintendent over every individual employed in or out of the institution, and over every department and affair, within or without, which bears any relation to it—always subject to the minutest scrutiny and supervision of the Directors, and in no sense independent of their authority.

“The entire control of the medical and moral treatment,” as stated in the “Propositions,” includes every department, internal, external, financial, remedial and agricultural. The duties of the officer are unavoidably and inseparably interwoven into the management of every department, since every department is directly or ultimately designed to promote the welfare of the patients exclusively entrusted to the care of the Superintendent.

The Superintendent alone is held responsible by the public for any mismanagement, whether it be by injudicious purchases of food, fuel or furniture, or actual fraud in finance, or through the negligence, waste, shiftlessness, or abuse of employees, whether they be directly, or not directly under medical supervision.

I have no personal variance at stake whatever, but my design is to endeavor to prevent the possibility of

dissension, and make plain the path of prosperity, which I am assured, under the right system, lays open and clear for the Retreat.

I remain very respectfully,  
Your obedient servant,

JAMES H. DENNY.

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PHILADELPHIA HOSPITAL FOR THE INSANE,

Philadelphia, Jan. 4, 1872.

*My Dear Doctor:*

I have received your letter, asking my views in regard to the organization of Hospitals for the Insane, and to which I take the earliest opportunity to reply. In doing this I have no hesitation in speaking emphatically, because, so far as I know, there is no difference of opinion among practical men on the subject, nor has any institution ever been able to get on comfortably and satisfactorily under any other system, than that which is now almost universally recognized as the correct one. The attempt has been made, over and over again, and has always failed, as it always will fail, until men's characters are totally changed. Everything connected with the practical working of a Hos-

pital for the Insane, must be regarded as a part of the institution, and must be under the supervision and control of the Superintendent, who must be regarded as the chief executive officer, and responsible in all things to the Board of Managers alone. All other officers must be strictly subordinate to him, and must perform their duties under his direction. This applies to Assistant Physicians, Stewards and Matrons, and to none more specially than the two latter.

It would be just as reasonable to expect good discipline on a ship with two captains, or in an army with two generals-in-chief, as in a hospital for the insane, where the Superintendent and the Steward and Matron, were acting independently of each other. Harmony cannot long exist under such an organization, and without harmony no institution can do full justice to its inmates, or obtain the degree of success of which it is capable. I trust what I have written is sufficient to make you understand fully my own views, and I think they are the views of every member of the Association of Hospital Superintendents.

Very respectfully yours,

THOMAS S. KIRKBRIDE.

JAMES H. DENNY, M. D.,

*Retreat for the Insane, Hartford, Ct.*

HEADQUARTERS DIVISION OF THE SOUTH,  
LOUISVILLE, KY., Jan. 22, 1873.

DR. J. H. DENNY, SUPT. RETREAT, HARTFORD, CT.

*My Dear Doctor:*

I cannot better answer your letter of the 15th inst. than by sending you—with my entire concurrence therein—a letter I have received from the Medical Director of the Division, Surgeon W. J. Sloan, an officer of great experience, to whom I showed your letter and the correspondence it enclosed. He is better able than I am to speak as to the *kind* of responsibility his profession is under, and as to what is necessary to enable any one in it to meet that responsibility. Our military hospitals are conceded to be in advance of those of any other nation, and this mainly because of the unity of authority and responsibility.

Yours, Sincerely,  
IRWIN McDOWELL, MAJ. GEN.

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LOUISVILLE, KY., Jan. 19, 1872.

*General:*

The code adopted by the American Association of Superintendents of Insane Asylums, by which the sole control of those Institutions is given the Superintendents, subject only to the action of the Directors, is, I think, in strict accordance with the spirit of the age. This advance is in the right direction, and the good re-

sults following such a mode of administration were fully and thoroughly exemplified in the organization and government of the General Hospitals of the Army during the late rebellion.

Many of those Hospitals contained five thousand beds each, with a corps of medical officers and nurses, employees, &c., comprising an organization frequently of six thousand persons.

The Surgeon placed in charge had sole control of the Hospital in all its administrative and executive duties, and command of those subordinate to him, subject of course to the approval of higher authority. Under existing laws and regulations, buildings were erected and repairs made by the Quartermaster's Department, and Commissary stores issued in bulk by the Commissary Department on the usual requisitions. With these exceptions, the whole administration, direction and control of the Hospital, and everything within its defined limits were confided to the Surgeon in charge, who was held, alone, responsible and accountable for its government.

In the Department of the East, where I served during the war, there were twenty-eight General Hospitals, with twenty-five thousand beds. During the war one hundred and fifty thousand patients were received and treated. The successful working of the system was undoubtedly, and most satisfactory in all respects.

We had advanced far beyond the system maintained in the armies of Europe, especially in France and Russia. I had many interviews with Lieut.-Gen. De Haurovitz of the Russian navy, who was sent to

examine and report upon the administration of the Medical Department of our army during the war, and he was unqualified in his praise of the system which elevated the Medical Corps to such a standard of control, not only of the treatment of the sick, but of the management of Hospitals, the sanitary condition of the troops, and the general hygiene of the army.

I think there can be no question of the correctness of a code which gives a Superintendent of an Insane Asylum the same control as exercised by an Army Surgeon in the position which I have stated, and with much more propriety and reason, from the nature of the service; he being placed over an institution in which mental diseases are specially treated.

With one head the responsibility and accountability are fixed, the responsibility is great, but is a stimulus to the conscientious and energetic discharge of a high duty.

Very Respectfully Yours, &c.,

Wm. J. SLOAN,

*Surgeon and Med. Director, Dept South.*

MAJ.-GEN. IRWIN McDOWELL, U. S. A.

7 NEWBURY ST., Nov. 20, 1872.

*Dear Doctor:*

At the New Hampshire Asylum I was Superintendent and Treasurer, elected to both offices by the Trustees. The Assistant Physician, Steward, the

Matron, and everybody else, in doors and out, were employed by me, and their compensation fixed by me, and they were paid by me, and dischargeable by me, and I was responsible for their trustworthiness. There never was and could not be any *conflict* of authority.

At Somerville (the McLean) the officers, to wit: Steward, Matron, Assistant Physician and Supervisors, were *elected annually* by the Trustees, and by my *nomination*. They were not *eligible* to office but by my nomination. So that amounted to the same thing, all the attendants were employed by me, or by my direction, and this was done by deputed authority, usually to the Steward or Supervisors. I never hesitated to discharge an attendant, kitchen or farm employee, Supervisor or Assistant Physician, if I felt it needful.

Now the object of all this is to secure harmony. There can be but a single head of the house, and he must be *responsible* to the Trustees, or Chief Governing Board, for everything. *Every way has been tried, and this alone works well.* The Superintendent should account to the Trustees, (Governors, Directors, Managers, whatever their designation,) for the entire management in doors and out, and be held responsible, otherwise there will be a continued clashing and conflict, and little troubles and irritations, which will worry a man's life out, and yet be contemptible for their insignificance. This course in no way detracts from the power or the dignity of the Trustees. They are *supreme*, and can criticise and direct the Superintendent *absolutely*—and they are saved the bother of settling the difficulties which can all be *avoided*—which

never occur if there be but *one head* of the house. It in fact leaves the Trustees to their position of proper dignity. If anything goes amiss they call the Doctor, the Superintendent, to account, and they *demand* of him, its explanation and correction. Otherwise they will have at the Hospital a double-headed arrangement, a division of authority, which never has been found to work efficiently or kindly—and will find themselves performing the duties, and tormented by the *bothers* which should never exist, or at least, which should not annoy Trustees.

I hope I have made myself intelligible, but in the many interruptions occurring since the fire, I am not certain.

Yours Truly,

JOHN E. TYLER.

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3509 BARING ST., PHILADELPHIA, Jan. 3, 1873.

*Dear Doctor:*

Your favor was duly received, but a press of engagements has prevented an earlier acknowledgement. I had supposed you had made your calling and election sure, but I think you do well to have a perfect understanding as to the exact limits of authority possessed respectively by the Superintendent and Steward. It is curious how tenaciously the Retreat has clung to the old English system, while it has been almost entirely abandoned in England, and was never introduced into

this country except at Hartford and Bloomingdale. The latter, after experiencing a host of troubles flowing directly from this system, has finally abandoned it, and ever since, estrangement and collisions have given way to peace and harmony. In the management of an establishment employing many persons, working together for the promotion of a special object, the dictates of common sense, and the testimony of experience, show the need of one supreme head to whom all other authority is subordinate. So surely as any plan of independent, divided power is introduced, just so surely will the result be collision and mutual distrust. Your Managers think that by giving the Superintendent complete control of the "medical and moral" management they have provided against conflict of authority, because they do not see—and only those who are personally concerned in the practical working of a hospital can see—that medical and moral management embraces everything, because nothing can be done which has not a bearing, more or less direct, on the medical or moral interests of the patients. If there is any department of a hospital's affairs in which the Steward's supreme control might seem to be justifiable, it is the farm, and yet even there, for the reason just alluded to, the Superintendent should be the controlling power. For instance, he thinks that a certain patient would be benefited by working on the farm, and sends him out for that purpose. Soon after he finds that he is badly treated by one of the farm hands, and requests the Steward to discharge him. The offending member happens to be a favorite of the Steward, or

the latter thinks the Superintendent is unnecessarily particular, and declines to discharge him. The result is, that the patient is taken in, and loses the benefit of farm labor. To take another phase of the case : while the Superintendent is striving, and scrimping in every direction, to get the means for buying a magic-lantern, or a donkey team, or a new carpet for a patient's day room, he sees the Steward indulging in the purchase of fancy stock, or some other questionable methods of spending money, and the sight is not calculated to produce good feeling or harmony of action. I mention this instance to illustrate the proper relation that should exist between those two officers, and the instance, instead of being exceptional is one that might be paralleled in every branch of the service. If the Steward is independent of the Superintendent in any respect, then the people employed by the former are not amenable to the latter, though meeting them every day, in doors or out, and it needs no stretch of wisdom to see what the influence of such a relation will have on such employees as are under the direct control of the Superintendent. I might use a quire of paper in mentioning illustrations of the mischief arising from any division of authority, but these are enough to furnish a clue to a multitude of others.

The doctrine I inculcate was many years ago recognized, and formally embodied in several propositions, by the Superintendents of Hospitals at their meeting in Baltimore, in 1853.

I should suppose the Managers of the Retreat would be glad of this opportunity to change a system which

has always, during the whole existence of the institution, created a chronic irritation between the Superintendent and Steward, and materially impaired its progress. I hope they will see the matter as outside observers do, and thus remove all ground for hesitation on your part. With this troublesome feature out of the way, your administration of the Hospital, I doubt not, will be honorable to yourself, and useful to the community.

I remain, Yours Truly,

I. RAY.

DR. DENNY.

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N. H. ASYLUM, Jan. 27, 1873.

*My Dear Doctor:*

In answer to your question, "what is the proper scope and limitation of the supervisory duties of a Superintendent, and what is the extent of his authority over associated officers and employees, as well as his relation to superiors, and vice versa?" I will give as brief a statement of my views as I am able.

All controlling power being vested in the Board of Trustees or Directors, in my opinion, that power can be most effectually and happily exercised over the varied operations of an institution for the insane through a single organ, the Medical Superintendent. Under the constant supervision of the Directors, this officer, I think, should be by them clothed with power to regulate the performance of the duties of all persons

employed in and about the institution. He should be, for all executive purposes, the single responsible head, to whom all associated officers and employees should be directly responsible in the discharge of duty; thus embodying and exercising the supervisory functions of the Directors over all the operations of the institution, and responsible to them for the proper exercise of these powers.

I believe that by this method the Board of Directors can secure the ends of their organization much more successfully, and with much less friction of machinery than by the creation of heads of departments independent of the Superintendent. The reason for this is found in the peculiar relations of each and every class of duties to be performed in an asylum for the insane. All these, however diverse apparently, come to a common focus, and bear upon the treatment, medical, hygiene or moral, of the patients, and cannot be separated from it. For example, the kinds, quantities and qualities of supplies, and the time and method of their preparation, in minutest details, is inseparable from the medical treatment, as an adjuvant or disturbing influence. Warming and ventilation, too, stand in the same relation, and both are to be regulated by the medical Superintendent. But such regulation requires the control of the steward, housekeeper and engineer.

Again, all furnishings and the fitting of them, embracing kind and styles, have an aesthetic, as well as an economic relation, and thus perform a part in the moral treatment. The same significant relation exists between the habits, tastes and traits of character, intel-

lectual and social, of all persons employed in and about an institution for the insane, and the successful treatment of their maladies.

For this general reason all these influences require to be under the immediate control of the chief medical officer, as much, and in the same way, as the regulation of rest, exercise, or the kinds and quantities of medicines. There is no more important element in the success of moral treatment than unity of spirit and influence pervading every department of activity in a house for the insane, and nothing, in my opinion, contributes more to this than the existence of only a single organ of control between the Directors and every post of duty.

Considerations of this kind might be indefinitely multiplied, but these are sufficient to indicate the foundation of my firm belief that the greatest degree of efficiency may be secured, and the most troublesome evils avoided, by making the chief medical officer directly responsible to the Directors for the proper discharge of duty in all departments and all others to him.

I will not weary you by further expansion, but with cordial wishes for your highest success and usefulness, subscribe myself,

Very Sincerely, Your Friend,

J. P. BANCROFT.

BLOOMINGDALE ASYLUM FOR THE INSANE,  
NEW YORK, Feb., 1873.

*Dear Doctor Denny :*

In reply to your inquiry respecting my view of that proposition of the "Plan of Organization," &c., recommending the nomination of Stewards by the Medical Superintendent, I would say that the section meets my entire approval.

In the majority of institutions there cannot, I think, be a doubt that departure from such usage would seriously impair the moral and official influence of the Medical Superintendent for the general good of the institution, and this, it seems to me, should be decisive on the point.

That some institutions move on smoothly and successfully under a different system, is creditable to the good sense of their officers; but a plan of organization should disregard individual temperament, and should be designed to work without serious friction, even if the personal factors should not be as accommodating and "reciprocating" as those of mechanical apparatus.

\* \* \* I have no doubt that institutions are better managed under the system recommended by the "Association of Superintendents" than under the old English method, which still retains its sway in some American asylums.

Yours, Very Truly,

D. T. BROWN.

JAS. H. DENNY, M. D.

BOSTON, March 5, 1873.

*Dear Doctor:*

During all my medical life I have been more or less connected with hospitals, and in answer to your letter of March 4th, I reply, that to put any hospital under two heads, appears to me as preposterous as it would be to have two commanders on board a ship of war, or two generals-in-chief in an army.

If such has been the method hitherto pursued at Hartford, I wonder how the asylum has met with any success. I am sure that it must have been cramped in its ability to minister properly to the wants of the unfortunate and interesting patients under its charge.

The more I reflect upon the question, the more I wonder at any Board of Trustees ever doubting on the subject. *One man*, in whom they *have perfect confidence*, should be *supreme* within the walls of an asylum for the insane. Of course he would be under the direction of the trustees, but he should not be interfered with by any one save the trustees. The idea of having another officer supreme in *one of the departments*, strikes me as wholly wrong. Nothing but evil could result from such a plan. The person to be *supreme* is the physician. He should have all the power necessary to carry out the many details needed in such a place. This he would do by means of under-officers, who should be responsible to him, and subject to removal by him in case they failed. He should select them, and see that they performed their whole duty.

You will thus see that I cordially endorse all the

prominent suggestions made by the meeting of Superintendents of Asylums.

I remain, Dear Doctor,

Very Sincerely Yours,

HENRY I. BOWDITCH.

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271 RACE ST., CINCINNATI, OHIO,

March 11, 1873

DR. JAMES H. DENNY,

*Super. Retreat for Insane, Hartford, Conn.*

*Dear Doctor,—* Your favor has been duly received. I think there can be no question as to the propriety of the rule adopted by the Association of Superintendents. Certainly my observation and personal experience has convinced me that the medical officer in charge of a hospital ought to be superior to every one else under the hospital roof, and the most satisfactory results can not be secured under any other state of things. There ought not, at least, to be two separate and independent heads—the one medical, the other non-medical. One or the other should have control. As you know, in our military service the medical officer in charge of a hospital is the superior officer to whom all others are subordinate, is by law and in fact a post-commandant. In the European military establishments, a different rule prevails—the medical officer or officers being subordinate to the intendant, a non-medical man. The superior excellencies of our system are very generally recognized abroad, and the unparalleled success of our

hospital system during the rebellion is attributed by foreign visitors, in large measure, to the fact that the medical officer in charge was supreme within the hospital limits. I mention military hospitals rather than civil, because an insane asylum in very many respects resembles much more strongly military than civil hospitals. In the latter, the visiting surgeons and physicians have little or nothing to do with the administration of the house affairs, and the residents are simply aids to the visiting staff. In an insane asylum, the superintendent, too, must do something more than examine and prescribe, and this something more is the important part of his duties, for the accomplishment of which he should have supreme control, subject only to the power that appointed him. If you think any further expression of opinion on my part may be of any service to you, please let me know.

With kind regards, I am Yours Truly,

P. S. CONNER.

SANFORD HALL, FLUSHING, L. I.,  
March 15, 1873.

DR. DENNY, HARTFORD RETREAT, &c.

*My Dear Sir,—*—My absence from home on account of the death of my honored father, must be my apology for delay in answering your letter of the 4th inst.

The action of the Association of Medical Superintendents in regard to the management of all asylums—public and private—is explicit, and is based upon the experience of superintendents who have tried all plans,

and have settled upon certain points as absolutely indispensable to the successful and complete working of a well ordered institution for the treatment of the insane. These points, stated in a general way, are as follows :

1st. The general controlling power should be vested in a Board of Trustees, but the Superintendent should be the *chief executive* officer of the establishment.

2d. The Superintendent should nominate to the Board of Trustees persons whom he shall select to act as assistant physicians, steward, and matron.

3d. The Superintendent should not be restricted in his power to select and nominate those who are to aid him in the administration of the institution ; and as the responsibility of doing so is his, he should also have the power to change, discharge or appoint, his assistants, according to his judgment, and subject only to the advice of the Board of Trustees.

4th. Every department of the institution should be subject to the Superintendent's direction and supervision, and he should be made responsible for the acts of those whom he appoints.

5th. The Steward, under the direction of the Superintendent, and by his order, should make purchases for and keep the accounts of the institution ; engage, pay and discharge his subordinates ; have the direction of the farm, garden and grounds, and perform such other duties as may be assigned him by the Superintendent.

6th. The Matron, also, in her own department, is to conduct the domestic arrangements of the house, subject, as in the case of the steward, to the direction of the Superintendent.

In other words, the Superintendent can only be made fully responsible for the safe and thorough management of the asylum, by having the power to place in the many situations under him those persons whom he knows he can trust, and who can work in sympathy and harmony with him in the performance of his arduous duties. I can only add, that eighteen years of experience have convinced me of the entire wisdom of this plan, as adopted by the Association of American Superintendents. It is not only *wise*, but is, in my judgment, the *only* plan on which the *practical*, and, more than this, by which the *humane*, interests of an asylum for the insane can be secured. The larger the establishment, the more vital it is, in my judgment, that there should be *one* controlling and responsible *head*. Thus only can harmony of action be secured, and the best and highest interests of an asylum be promoted. Perfect system and order are the first law of an institution, and to this anything like conflicting authority must inevitably prove fatal.

Excuse my hasty expression of opinion. If I had more time, I could say more on the subject, and say it better; but I could not live a week in Sanford Hall, and expect to comfort and benefit, and restore a single patient, unless I knew that I was absolute in power of appointment and discharge of every employee in the house. Harmony follows, as a matter of course, and I know I have the undivided sympathy and help of every one in the establishment, from matron to cow-boy.

I am, Dear Doctor, yours, &c.,

J. W. BARSTOW.

MCLEAN ASYLUM, SOMERVILLE, MASS.,  
March 18, 1873.

DR. JAMES H. DENNY.

*Dear Sir*,—Your letter, asking for my views in regard to the relations between the Superintendent and other officers of asylums, was duly received.

Some time since I sent you a copy of the “Rules and Regulations” of our Trustees, created by them some years since, and which have always been strictly observed.

The Superintendent is regarded as the only head of the institution, and is held responsible for the good behavior and efficiency of all the officers, and for the care of all the patients. He nominates to the Board of Trustees suitable persons to act as assistant physicians, steward, and matron. He has entire control of the medical, moral and dietetic treatment of the patients; the power of appointment and discharge of all persons engaged in their care; and is expected to exercise a general supervision and control over every department of the institution.

The Steward, under the direction of the Superintendent, and by his order, makes all the purchases, keeps the accounts, has a supervision of the farm, garden and grounds, and performs such other duties as may be assigned him.

The Matron, under the direction of the Superintendent, has the care of the domestic arrangements of the house, and does what she can to promote the happiness and restoration of the patients.

For fifty years these rules have been observed in

the management of this asylum, and all moves on smoothly, with no clashing. If any repairs are to be made, or any changes of importance in the arrangements of the house, the Trustees are informed by the Superintendent, and their consent being given, the latter instructs the Steward how the work shall be done.

The Matron always consults the Superintendent previous to making purchases for the asylum, and none are made without his consent.

With so many varied interests as exist in an institution of this character, the importance of which can only be fully realized by those who spend their lives within its walls, nothing but confusion and the failure of its highest aims can result from any other course than a rigid adherence to the principle, that to Trustees, to officers, and to patients, the Superintendent is its only recognizable head. Whenever this matter has been brought to the notice of the Board of Trustees, they have always most unequivocally sustained the Superintendent. While he always consults them in regard to any vacancies which may occur among the officers, the nominations always come from him.

Very Truly Yours,

GEORGE F. JELLY, *Supt.*

CITY HOSPITAL, BOSTON, March 20, 1873.

*My Dear Doctor:*

\* \* \* The troubles come from the great defect of the system by which two officers, with independent authority in certain matters, are put in the same house. Even two *good* men, thus set over against each other, must be "jealous," as a matter of self-preservation. The duties of Superintendent and Steward in such relations to each other, and to employees and patients, are so complicated that, with the utmost zeal and good will, they must be constantly on their guard to avoid conflict. It may appear easy enough in the "rules and regulations," but it won't work well in practice. But when these two officers hold different views of what is good policy, and differ in their methods of attaining good ends, what infinite trouble and waste of effort may follow in trying to make matters move on smoothly and decently; what discouraging obstacles a zealous Steward may, in the name of economy, put in the way of a properly humane and liberal policy on the part of the Superintendent. Then come misunderstandings, and all that, and the troubles that surely follow. All this may certainly occur, and under the government, too, of a reasonably liberal board of managers. In such a state of things, the Steward has a great advantage over the Superintendent, for the reason that the former is much the inferior in official and professional rank, and the latter, being the *nominal head* of the institution, as his title indicates, is *practically* always held responsible for, and must bear the odium of, any want of "*success*" in

the management. And that management is in danger of being reputed unsuccessful which is known to be constantly at war within itself about matters of detail. Therefore, it results that, under the system I am describing, a Superintendent will and must endure much for the sake of good order, peace and harmony, and for his own reputation as a manager, if he has a Steward at all disposed to go beyond his province, and who will naturally care less for *consequences*, because he has so much less to suffer from them. To go on, under such circumstances, with any degree of success—even to go on at all—would be a difficult matter; and that Dr. Butler did so at the Retreat, is no evidence that the system is a good one. Indeed, he *had* to succeed there, because he could hardly *afford* to fail a second time; for, if I am not misinformed, even he was a victim to an ignorant and intolerant steward before he went to the Retreat. This, as you may know, was at South Boston Hospital, where the old plan was long since done away with. The same change has taken place at the Massachusetts General Hospital within the last ten years. The office of steward, who there had some of the independent authority of the old plan, was abolished, and Dr. Shaw, as resident physician, was given entire control of all the affairs, responsible to the board of trustees for all things that were done in its management. When I came to this hospital, in July last, to succeed Mr. Cutler, the trustees purposed appointing a steward (which office had not before existed, as Mr. Cutler performed the duties thereof), and I accepted my appointment only upon certain condi-

tions, which gave me, among other things, the power of nominating all the subordinate officers of the hospital, who are thus made responsible to me, and *for whom I* am responsible to the trustees. By my request no appointment of steward was made, and we are going on so far (I have reason to believe), with satisfaction to the board. We are expending something over \$100,000 per year, and my officers are two clerks and a matron. At the Retreat, where you have the immediate professional care of the patients, you should of course have a steward to whom you can delegate more largely than I do the financial affairs of the house, but you should nominate him, and in all respects be his superior officer. This is essentially the military plan, and I believe is the best one. The surgeon in charge is held responsible, not only for all he does himself, but also for all that his subordinates do, and, as a matter of common fairness, is given full control over all of them. If any are unsatisfactory, it is easy to change them for others. This leaves him no excuse for bad management, and if his work will not stand rigid inspection, he is "transferred," and a more efficient officer put in his place. This plan fixes and defines the responsibility of the Superintendent, and if anything goes wrong the remedy is easily applied. He knows what is required of him, and is given full power to *exact* from his subordinates the fulfillment of these requirements. This makes the whole matter plain, with no confusing complications. There is no one in his own household who has the *right* to obstruct the execution of his plans. He is not obliged to spend his

time in keeping on good terms with his inferior officer. I should feel myself wanting in self respect, if I consented to be a *Superintendent* in name, and not in fact, as I should do by having a steward who was authorized to do any official act independent of my approval as Superintendent. I should infer that I could not be trusted with the control of things ; that authority was given to the steward as a check upon my doings ; and that I had not the full confidence of the trustees in my fitness for the place. It is not necessary that I should be “a good buyer” of groceries and dry goods, or a good machinist. The steward may make purchases better than I can, and the engineer will safely manage the boilers and steam engine that I might not dare to meddle with, but they should do it *for me*, and I should *have it done* for the trustees.

In regard to the nomination of all subordinate officers by the Superintendent, I cannot see that it takes away any authority from the board of trustees, while it is an invaluable privilege to the former, for its moral effect upon the persons nominated. The Superintendent *must* and will be anxious to nominate acceptable persons, and these may be rejected or deposed at will by the board. The board can observe all their doings as critically as before, and while holding the Superintendent responsible for their acts, can have an additional check upon *them* by *his* constant presence in the house as their representative. To sum up the whole matter, I would have nothing to do with any such a two-headed arrangement as is the obsolete plan of management at the Retreat. For the sake of my own peace

of mind I would seek other employment. If I were assured that the present Steward would soon go away, I might be content to go on as at present for a reasonable length of time, till a change could practicably be made, but the principle of the thing should be established at the outset. I hope to hear that affairs at the Retret have been satisfactorily arranged, and I am sure that with a fair field before you, you will do credit to yourself and honor to the Institution. With kindest regards to you and Dr. Whittemore, I am,

Very Sincerely Yours,

EDWARD COWLES, *Supt.*

DR. JAMES H. DENNY,

*Retreat for the Insane, Hartford, Conn.*

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GOVERNMENT HOSPITAL FOR THE INSANE, NEAR  
Washington, D. C., March 24, 1873.

JAMES H. DENNY, M. D.,

*Retreat for the Insane, Hartford, Conn.*

Dear Doctor,—In answer to your letter of the 4th inst., asking my views in relation to the proper organization and practical administration of institutions for the insane, I embrace the first moment at my command for the purpose, to express my entire concurrence in the propositions relative to the organization of hospitals for the insane put forth in 1853, by the Association of Medical Superintendents of American Institutions for the Insane, "as the unanimous sentiments of the Association on the subjects referred to," (vide pages

67, 68, 69 and 88 of the American Journal of Insanity, for July, 1853.) Nearly twenty years have now elapsed since the Association, after a full and careful consideration of each branch of the subject, and with a deep sense of the responsibility of the act, published this declaration of the principles upon which, in the judgment of its members, institutions for the insane should be organized and administered, and in all that time I have never known a single superintendent to dissent from one of those principles, though the number of insane persons under regular treatment, the number of institutions, and the number of boards of management and of superintendents have at least trebled. And, indeed, except one or two municipal institutions in the city of New York, ostensibly established and maintained for the humane care and treatment of the insane, but really the agents of personal political preferment and power, the establishment with which you are connected is the only one in this country that, it has generally been understood, has to the present time practically adhered to the old English plan of managing such institutions, notwithstanding that it has in most, if not all cases, been abandoned in the country of its origin. Now, if what I have stated be true, and I believe it is, does not the statement itself render it highly probable that the plan of organization and management embodied in those propositions is the one best calculated to secure the harmonious and efficient executive administration of institutions for the insane, and to promote the fullest attainment of the great purposes of their establishment and maintenance? I think it

does ; and if about seventy (70) hospitals, asylums and retreats for the insane in the United States, organized on the basis of those propositions, have always worked well, as far as the matter of mode of organization has affected their working, as I believe they have, and if the old English organization, with several theoretically co-ordinate, but practically independent and repellent officers, has not worked well in a single instance, here or abroad,—has not been as useful, and enjoyed as high a reputation as it ought with its opportunities,—then it appears to me that it is shown to a demonstration that our common American organization of institutions for the insane is better than any other. This is, in brief, the answer which *experience* returns to the questions you have propounded.

Let us for one moment give this question an *a priori* consideration on the basis of reason and common sense. The welfare of most of the insane requires that they should be gathered into families by themselves. All the objective inmates of one of these families are sick people, afflicted with the greatest and most complicated disorder to which humanity is subject, and a physician is therefore placed at its head. He always should be, and generally is, a man of the highest personal character, and of assured skill in the medical and moral treatment of mental disease. He generally is such a man because most boards of management, it is due to them to acknowledge, earnestly seek to obtain men of such character and qualifications for such weighty trusts, and because the men who have qualified themselves for such trusts by experience and study, have

already consecrated themselves to the duties of a professional career of the greatest difficulty and sacrifice. Now does it not stand to reason that such a family, like all other families, should have but one head? that the man upon whom are imposed the high and delicate responsibilities of such a headship should have supreme authority over every one employed to aid him in such a difficult and arduous work? I am not aware that any one has ever denied that the physician of an institution for the insane may give his patients what drugs he pleases, without any other let or hindrance than his amenability to the judgment of his professional peers and his responsibility to the law of the land. But what is called the moral treatment of persons afflicted with mental disease is at least as important as the medical, and infinitely more difficult, because it involves every one of that vast range of influences which affect the conditions both of the mind and body, in disease and health. The adaptations of food, heat, light, ventilation, exercise, association, occupation and scene, necessary to secure the highest results of treatment, are infinite. No one can appreciate either their influence or their importance as can the physician devoted to their welfare and responsible for it, and to say that the efficient and prompt co-operation of any class of assistants in a work requiring so much painstaking, self-denial and discretion, can be certainly and effectively secured by any other relation of those engaged in it than the strictest subordination, in every detail and particular, of all associated with the Superintendent to the Superintendent,—of all others to one head,

and the head to itself,—is, it seems to me, to ignore all the experience of mankind under similar circumstances. It should be borne in mind,—and in this consideration lies the very essence of this question,—that the conduct of an institution for the insane necessarily includes the personal control and government of deranged people. No other problem in life involves so many practical complications and difficulties. They cannot be described by any one, be he ever so familiar with them. They can be appreciated only by those who have made the solution of the problem an earnest life work. And shall the Superintendent of a hospital, charged with the solution of such a problem, have the full authority when he reaches the objects of all organization and expenditure, and be denied it in respect to the agents through whom he must execute his difficult task ? A matron may by her indiscreet words, or the steward by his neglects in the commissary of the establishment, turn the scale of life and death—of recovery and lifelong insanity—against the patient. (I do not draw upon my imagination for these illustrations.) And to say that such evils can be prevented by the responsibility of such assistants to any printed rules of a board of trustees, is simply to say what every one, in a position to really know, does know is not true. The cashier and clerks of a bank or insurance office can readily have their daily duties prescribed, and at night it can be seen at a glance whether they have fully and properly performed them or not; but you can no more define a single day's duties in relation to a single patient, of an officer or employee of a hospital for the insane, except

in a very general way, than can a shipping merchant in his office in Front street define the duties of a sailor in a storm in the Straits of Magellan.

Finally, there comes up the question of the precise practical effect to be given to the Propositions of the Association. Their proper practical operation seems plain to me, but as the Constitution of our National Government has received different interpretations, so there have been some differences in the application of these rules to the management of institutions for the insane. I will therefore say that, in my opinion, it should be made the duty of a superintendent of a hospital or asylum for the insane to hire and discharge every subordinate officer and employee of the establishment, and direct every one in the discharge of his or her functions. The superintendent should have the power to do this, not for love of authority nor oppression, but because no subordinate officer, much less any ordinary employee, will feel and observe that subordination to the superintendent that is requisite to an efficient and discreet discharge of the more or less trying duties of his position, unless he knows and feels that the executive head of the establishment is his employer. Unless the mistress of a family of a dozen sane persons hires and discharges her own servants, she cannot have either obedience or efficient service, and just in the proportion that obedience, efficiency and discretion are more needful in a family of several hundred insane persons than in a sane one of a dozen, is it more necessary that an asylum superintendent should, in effect, engage and discharge every resident employee

in it, from his first assistant to the scullion. It should be the right and duty of the trustees of a hospital to confirm or reject, as they may deem necessary, the nominations of the superintendent for assistant physicians, chaplain, steward and matron, and fix their salaries. They should also frame a schedule of the pay of attendants and servants. The managers should also, as it seems to me, visit the institutions under their control frequently,—much oftener than is the case in many instances,—and keep themselves as thoroughly acquainted with its daily management as practicable. By such a course they will be best enabled to appreciate the services of a good superintendent, and to aid and encourage him in his difficult work, and also be always prepared to arrest any serious wrong, should it occur.

As this question involves not only the welfare of the insane of a particular institution, but the progress and usefulness of our institutions for the insane everywhere, I feel a very deep interest in it, and find that that interest has led me to write at much greater length than I intended. I also find that the style of my letter is quite diffuse, the common result of writing very hastily. If it is too long to be of use to you, I shall be sorry.

Having much confidence in your ability and devotion to your work, I very much hope that you will be given the authority to discharge the duties of your very responsible position with the highest usefulness to your patients, and with the highest credit to the Retreat and to yourself.

I am Yours, Very Truly,

C. H. NICHOLS.

CITY HOTEL, HARTFORD, CONN.,  
March 25, 1873.

To DR. JAMES H. DENNY.

*Dear Doctor*,—In your late letter addressed to me as “President of the Association of American Superintendents of Lunatic Hospitals,” you asked me to give you the official expression of the sentiments of the Association, and also my own opinion as representative of the views of Ameriean Superintendents relative to the scope of authority and supervisory duties properly attaching to the office of a Superintendent, and his relations to superiors and subordinates.

I cannot give you an intelligent and comprehensive auswer, without briefly alluding to the history of lunatic hospitals abroad and at home.

In the organization of the early lunatic hospitals in Europe, the chief medical officer, on whom the real responsibility of the hospital was made to rest, was placed on a rank in the organization of the government rarely, if ever, above, but generally on a footing with, and often subordinate to, other officers. This false system of hospital government was, so far as I am informed, universal in Great Britain until within a few years, and was, as a matter of course, adopted in most if not every one of the hospitals established in the United States prior to that new era in hospital organization and government, which dates from the opening of the Worcester Asylum, in 1831. The natural and unavoidable results of such an erroneous system of government soon became universally apparent. Divided counsels, following divided authority, so gen-

erally produced discord, inefficiency and disaster, that public attention was everywhere aroused, and strong protest made, both in Europe and this country, against the continuance of a system so productive of disastrous results.

Before stating the position which the Association has taken upon this subject, let me quote the opinions of the highest authorities in Europe. Pinel, one of the most illustrious names of France, in medicine and philanthropy, says :

“ Whatever may be the principles on which an asylum is conducted, whatever modification it may receive from time, locality, and different forms of government, the physician, by the nature of his studies, the extent of his knowledge, and the strong interest which he has in the success of treatment, must be so well informed as to be the natural judge of everything that passes in a hospital for the insane.”

Jacobi, the experienced and distinguished physician of the large asylum at Sciberg, in Germany, says :

“ As every operation in this department also, (that of steward) must concur with the rest in promoting the ultimate object of the establishment, and as the most perfect unity of purpose and unimpeded activity must everywhere characterize all the exertions made to this end, so it is here again evident that the supreme direction and control of all the officers and servants, without exception, employed in this department, must likewise be concentrated in the directing physician.”

Esquirol, the highest authority of the age in which he lived, says :

"The physician should in some manner be the vital principle of an insane asylum ; it is by him that everything must be put in motion ; called as he is to be the regulator of all thoughts, he directs all actions. Everything which interests the inmates of the establishment points to him as the center of action. The physician should be invested with an authority from which no person can escape."

In 1841, the trustees of the New York State Lunatic Asylum were directed by the Legislature to visit and inquire into the government, organization, &c., of several lunatic asylums, and report to the Legislature a system for the government, &c., of their new State Lunatic Asylum at Utica.

In answer to letters from the President of this Board, Dr. Luther V. Bell, the late lamented and eminent Superintendent of the McLcan Asylum, says :

"Let me repeat my idea of the importance of an explicit division of powers among those having the immediate charge of the institution. Most of the troubles which have in former years occurred in this asylum, and at those of Hartford and Bloomingdale, arose from a clashing of authority between the medical head and the steward. The true principle is to be found in the system verified by the experience of the several institutions of this Commonwealth,—that of giving one man the power (under the oversight of the

managers), and charging him with the responsibility of the whole establishment."

Dr. McDonald, another of the highest authorities in the specialty, and formerly the Superintendent of the Bloomingdale Asylum, in answer to a similar letter of inquiry, says :

"The Physician-in-chief should be its first officer, the head in name and in fact, of the whole establishment, so that all other officers (under the board of trustees) shall be subordinate. The physician should be the mainspring of the whole machine ; the master-spirit of the entire institution. As he is to exercise such high functions, and to originate and direct the treatment, medical, moral, physical and dietetic, of thousands of insane minds, he should be held responsible for the results, at the same time that he should be invested with sufficient authority for the execution of his plans. He should have power to hire or dismiss all subordinate persons in the employ of the institution, and all superior officers should be so far under his control as to receive instructions from him. The adoption of this plan will prevent a division of interests, and keep one part of the household from arraying itself against the other, and if properly used will make everything tend to one point,—the comfort and restoration of the insane. If it confer upon one individual increased authority, it imposes additional obligations. His direct responsibility for the welfare of the institution and the conduct of its other officers, must check any abuse of power."

These trustees at the same time visited the South Boston Lunatic Asylum, of which I was then the Superintendent. My answer to the letter of their board will best meet the inquiry in your letter in regard to my own views. I said :

“ Every superintendent of a lunatic asylum should have entire control of all the departments of the institution, domestic as well as medical, under the direction of the board of trustees. He should have this control, because unity of action, arising from unity of views and sentiments, is the chief element of system. This cannot exist if the action comes from more than one source ; and without system, there cannot be success. Upon the Superintendent should responsibility rest, as under any arrangement, in public estimation, it will rest. He should have the entire control ; his spirit and his plans should pervade the whole institution ; from him all power should proceed, that, consequently, when he delegates to others the duties of the different departments, these duties will be performed in accordance with that system, however much the opinions of subordinate officers may differ from his. There can be no clashing of conflicting opinions where one system pervades the whole. This principle is adopted in all departments of associated efforts in society, and is nowhere more essential to successful results than in a lunatic asylum.”

These opinions, thus carefully expressed in 1841, have been most abundantly confirmed by the additional experience of more than thirty years.

The official expression of the Association of Superintendents will be found in No. 4 of a series of Propositions relative to the Organization of Hospitals for the Insane, unanimously adopted at a meeting of the Association held in Baltimore in 1852, to wit:

PROPOSITION No. 4.

"The Physician should be the Superintendent and chief executive officer of the establishment. Besides being a well educated physician, he should possess the mental, physical and social qualities to fit him for the post. He should serve during good behavior, reside on or very near the premises, and his compensation should be so liberal as to enable him to devote his whole time and energies to the welfare of the hospital. He should nominate to the board suitable persons to act as Assistant Physician, Steward and Matron. He should have entire control of the medical, moral and dietetic treatment of the patients, the unrestricted power of appointment and discharge of all persons engaged in their care, and should exercise a general supervision and direction of every department of the institution."

This proposition was unanimously adopted by the Association in 1852. At this day I believe it to express the opinion, not only of every one of the more than fifty American Superintendents, but to be accepted by every governing board, with not more than two or three exceptions, as the corner stone of the right organization of the lunatic hospital.

In this connection, and the more clearly to state our

views of the details of the duties of the Superintendents, I will quote No. 6 of the series of Propositions adopted by the Association. No. 5 refers simply to the duties of Assistant Physician.

PROPOSITION No. 6.

"The Steward, under the direction of the Superintending Physician, and by his order, should make all purchases for the Institution, keep the accounts, make engagements with, pay and discharge those employed about the establishment, have a supervision of the farm, garden and grounds, and perform such other duties as may be assigned him."

I remain, Very Truly, and with much kindly interest, Your Friend,

JOHN S. BUTLER, M. D.,

*President Association of American Superintendents, and  
Ex-Supt. Retreat for the Insane.*





REASONS  
FOR  
Considering the Expediency  
OF A  
Revision of the By-Laws  
OF THE  
Retreat for the Insane.

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PRINTED FOR PRIVATE USE.

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HARTFORD, CONN.:  
1873.



RETREAT, HARTFORD, CONN., June 6, 1873.

*To the Board of Directors of the Retreat for the Insane:*

GENTLEMEN,—I have the honor respectfully to acknowledge the receipt at this date of the following copy of votes passed at a meeting of the Board, June 2, 1873, in response to my request for official action upon the question of a revision of the By-Laws of the Retreat upon the basis of the “Propositions relative to the Organization of Hospitals for the Insane,” adopted by the Association of Superintendents of American Asylums for the Insane, May, 1853, viz:

“*Voted*, That, in the judgment of this Board, it is inexpedient to make any alteration in the By-Laws in regard to the management of the affairs of the Retreat.”

“*Voted*, To appoint \* \* \* \* ‘a committee to consider the expediency of any future change in the By-Laws, to report at a meeting of the Board to be held June 9th.’”

I am officially informed by the politeness of the Vice-President of the Board, that the objections to a revision of the By-Laws are essentially two-fold :

First, “The Superintendent of the Retreat was not designed by the By-Laws to have, neither ought he to have, any control of the financees,” which embraces the Steward’s department.

Second, “The principle of one-man-power is not in accordance with the sentiment of the By-Laws.”

The basis of management in every similar institution is its code of By-Laws. It is absolutely essential that they should be both comprehensive and unambiguous; else they should be revised, or some definite construction should be officially given them.

This simple course is necessary, in order to prevent misinterpretations, doubts, utterly unnecessary annoyances and confusion, which, however much concealed by the most patient endurance, will inevitably rankle, and cripple the energy, progress and usefulness of such an organization. Two prominent reasons exist, therefore, for considering the expediency of a revision of the By-Laws of the Retreat, on account of great deficiencies in each particular, viz:

First, They omit to specify, and to limit properly, important and well recognized obligations.

Second, They are so ambiguous as to be susceptible of different interpretations, at variance with their verbal expression.

In respect to the first objection, “that the Superintendent of the Retreat was not designed by the By-Laws to have, neither ought he to have, any control of the finances,” I say that the By-Laws are radically defective, inasmuch as they fail to specify and limit properly important obligations *already officially devolved* upon the Superintendent in regard to finance. In the first and most important item—that of *income*—he has already imposed upon him too great control, a larger degree of responsibility than I would seek, or, indeed,

is usually given to Superintendents, without more limitation and official supervision than prevails at the Retreat, notwithstanding the objection that the Superintendent ought not to have *any control* of finance.

In order to illustrate the official relation which the Superintendent bears to the annual income, allow me to present the following facts :

On the 27th day of October, ult.,—the date of my appointment,—the average rate of weekly board per patient was \$11.92, and the annual income at that rate was then \$91,015.08. At this date the average rate is \$14.37 per week, and the average annual income at that rate is \$102,350.04, a gain of \$11,334.96 in about six months time, and a larger average income, *by that amount*, than ever before received. *Every item* of this income is a *financial concern*, which the Superintendent alone attends to, fixes and negotiates.

I present herewith a regular form prepared by the authority of the Board of Directors, demonstrating, beyond doubt, the official relation which the Superintendent holds to finance, showing that he is, thereby, empowered to fix rates of admission, or, in other words, *is the only source* through which is derived the income of the Retreat.



## Retreat for the Insane.

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*Hartford, ..... 187*

*Gentlemen:*

*I recommend the admission of*

*M.....*

*of.....*

*into this Institution.*

*Supt. and Physician.*

*To the*

*Treasurer or Board of Managers.*

*\$..... per week.*

For the

**TREASURER,**

THOMAS SISSON, Esq.,

No. 259 Main Street.

---

Or,

**MANAGERS,**

F. B. COOLEY, Esq.,

No. 29 Farmington Avenue.

W<sup>M</sup>. R. CONE, Esq.,

No. 224 Main Street.

CALVIN DAY, Esq.,

No. 55 Spring Street.

One-third of the sixty weekly rates of maintenance fixed by myself, since the date of my appointment, average \$32.00 each.

That the personal as well as official influence of a Superintendent may have some controlling effect on income, the fact that four patients, during the time included, were admitted from Boston at the more advanced rates, attests to a certain extent.

I should under no circumstances have referred to these things did I not feel compelled to do so in defense of my reputation (seemingly at hazard if I have made unjustifiable claim of financial responsibility), and to demonstrate the official and personal relation which the Superintendent already holds to income. This great responsibility and almost unlimited authority, which the gentlemen of the Board impose upon the Superintendent, is one which should either be incorporated in the By-Laws, on account of their omission to specify and limit clearly this important function, and subjected to some supervision, or it should be elsewhere transferred, if the Superintendent is designed to have no control of finances, and, alone of itself, would appear to justify a request for a revision of By-Laws.

The only other relation which the Superintendent can bear to finance is that in regard to expenditures.

Our By-Laws state definitely that the Superintendent's signature must be appended to the bills of receipts and expenditure, and that without such endorsement they are not to be accepted by the managers.

At this point, the ambiguity of the By-Laws, or their susceptibility to very contrary interpretations,

would seem to demand revision. If the Superintendent has no control, and the By-Laws never intended it, it is plain that he cannot systematically endorse, as a matter of form, any such bills, although the By-Laws require it. The fact of endorsement presupposes an understanding and approval of the thing endorsed, as well as conveys the idea of regulating authority.

The By-Laws state that the wages shall be fixed by direction of the Superintendent, "*and not otherwise.*" This is an expenditure provided for by the By-Laws as belonging to the Superintendent. The Superintendent is required by the By-Laws "to advise with the Managers respecting *the financial concerns* of the Institution," and "to take charge of the Institution,"—no department, remedial, agricultural, or *financial*, being excepted; he is likewise enjoined "to take control of all persons therein."

Control of all persons cannot be distinct from control of all affairs about which such persons may be employed, whether included in the Steward's or the Medical department.

All this comprises the "Government of the Institution," which the preamble to the By-Laws unreservedly declares should be "entirely under the control of the Superintendent." This sentiment is announced in the records to have been the motive for the former revision, and should, therefore, be the guide to all interpretations of the By-Laws.

These few facts show that the By-Laws do provide specifically for the duties of the Superintendent relative to receipts and expenditures, or to the general control of the finances.

Although I deprecate frequent allusion to the McLean Asylum in illustration, still the little time at my command since receiving the votes referred to, precludes further investigation just now, but I beg to state that the By-Laws of that Institution put a limit on the expenditures to be incurred by the Superintendent of one hundred dollars for matters of repairs, improvement, etc. I mention this because the idea prevails apparently that that institution has given unlimited power to its Superintendent, which I am seeking to obtain in matters financial. Thus far it cannot but be observed that so far from suggesting any extension of the Superintendent's duties in this matter, I have, on the contrary, been seeking, for the most part, a limitation of authority already accorded, but which is apparently not perceived to exist.

This "susceptibility" of our By-Laws "to different interpretations at variance with their verbal expression," would appear to justify a request for revision.

I trust I may be pardoned for referring again to the McLean Asylum, which institution, on account of its wealth, has been thought by gentlemen of the Board to have no necessity of being watchful in imposing restraints upon its Superintendent in regard to matters of finance. That institution devolves the duty, in its By-Laws, of fixing rates, upon a Visiting Committee of the Trustees, "which shall meet," in the words of those By-Laws, "at least once in every week, at the Asylum. They shall fix the rate of board so low as to make it as much a charitable institution as its funds will permit, always regarding the circumstances of the

respective boarders, and the accommodations they may receive."

There is the same, or nearly similar law, in most all other like institutions. The object is to divest the public of the idea that the Superintendent is pecuniarily interested in such affairs.

Since the Superintendent, however, conducts the correspondence, he necessarily becomes acquainted with the facts which would enable him to adjust the rates of maintenance with due regard to both the pecuniary and pathological circumstances of those for whom admission is sought,—*i. e.*, he can best determine whether they may be likely to require prolonged treatment and a lesser rate therefor, or shorter treatment and a more advanced rate, as well as the probable demand for extraordinary attention.

The claims on charity, the necessities of the Institution, and the duty therefore of the Institution, as a charity, toward individual cases and to itself, must receive careful discrimination also. The Superintendent usually advises in the matter, but the ultimate signature, and official fixing of the rate, come from some committee of the Board of Directors. This is ordinarily a Weekly Visiting Committee, its members being so alternated, from month to month, that individual members do not visit the institution oftener than eight times annually. With the large Board of Directors at the Retreat, not more than about five visits annually would be required of each gentleman.

A Weekly Visiting Committee is appointed and its duties fixed in the By-Laws of most other institutions.

Our By-Laws only provide for a monthly visitation of the Managers, three in number. Theoretically, the Retreat "is subject to frequent visits from the Board of Managers, either together or singly; is subject to the constant watchfulness of a Board of Medical Visitors from various parts of the State, and a Board of Lady Visitors visit the institution as often as they choose."

During my superintendency, as a matter of fact—and it is no exception to the rule heretofore prevailing—I have not received an official visit from any source as often as once in two months.

I do not in the least complain, but I so thoroughly believe in the imperative necessity of systematic visitation on the part of a committee, provided for by the By-Laws, that I most earnestly desire that some plan be incorporated in our By-Laws which devolves a duty on prescribed officials of making regular weekly or "not less than semi-monthly" visits. In one asylum, the weekly visits have been omitted but once in thirty years. In view of the distrust which now so extensively prevails relating to the conduct of insane asylums, from which the Retreat does not escape, this defect in our By-Laws, in not providing for weekly visits; or in "*omitting to specify*" what are elsewhere considered to be important obligations, would seem to indicate a need of revision.

If any gross charge is made against the Retreat, the public have a right to demand whether its Superintendent is, or is not, under frequent and systematic supervision, as well as all matters pertaining to his duties.

The second objection to a revision is that "*the principle of one-man-power*" is not in accordance with the sentiments of the By-Laws.

The revision of the original By-Laws was undertaken, as the records testify, "to place the Government of the Institution *entirely under the control of the Superintendent*," and specify that *he* is "to take charge of the Institution \* \* and *the control of all persons therein*," making no exception thereto.

The By-Laws *as they read*, therefore, recognize fully, apparently, the principle of *one head*, and the Directors state that *the Superintendent* "is the head of the Institution," in the 16th Annual Report, and in the 49th Report—the last—the Managers state that "the Superintendent is far the most important officer in the institution."

There seems, therefore, to be such a susceptibility of conflicting interpretations that some definite meaning should be authoritatively given to the By-Laws, or the need of revision would appear to be unquestionable on this account even.

If they neglect to specify *the power of nomination and discharge of all officers* of the institution as a function of the Superintendent, THE VITAL POINT, so considered by the best authorities, it is because the advance made in sentiment and practice, during the thirty-three years which have succeeded their origin, has left them very far behind, and radically different from the present standard of organization, and is *the weightiest reason* for the revision of the By-laws.

To indicate emphatically what that standard is, I

present herewith opinions from Superintendents of the oldest and only institutions in the country incorporated like the Retreat, as well as of other distinguished gentlemen:

“The power of *appointment and discharge* should be clearly and unconditionally with the physician. It would be just as reasonable to expect good discipline on a ship with two captains, or in an army with two generals-in-chief, as in a hospital for the insane, where the Superintendent and Steward were acting independently of each other.”—DR. THOS. S. KIRKBRIDE, *Sup't Philadelphia Hospital for the Insane, and Ex-President Association of Superintendents.*

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“At Somerville (the McLean), the officers, to wit, Steward, Matron, Assistant Physician and Supervisors were *elected annually* by the Trustees, and by my *nomination*. They were not eligible to office but by my nomination \* \* .

“There can be but a *single head* of the house, and he must be responsible to the Trustees, or Chief Governing Board, for everything.

“*Every way has been tried, and this alone works well.*

“The Superintendent should account to the Trustees (Governors, Directors, Managers, whatever their designation), for the entire management in-doors and out,—and be held responsible, otherwise there will be continual clashing and conflict, and little troubles and irritations which will worry a man’s life out and yet be contemptible for their insignificance.

“This course in no way detracts from the power and the dignity of the Directors. They are *supreme*, and can criticise and direct the Superintendent absolutely, and are saved the bother of settling difficulties which *can all be avoided, and never occur if there be but one head.*”—DR. JOHN E. TYLER, *Ex-Sup’t McLean Asylum for the Insane, Mass.*

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“I have no doubt institutions are better managed under the system recommended by the ‘Association of Superintendents’ than under the old English method, which still retains its sway in some American asylums.”

—DR. D. T. BROWN, *Sup’t Bloomingdale Asylum for the Insane, New York.*

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“Most of the troubles which have in former years occurred in this asylum, and at those of *Hartford* and *Bloomingdale*, arose from a clashing of authority between the medical head and the steward. The true principle is to be found in the system verified by experience of the several institutions of this Commonwealth,—that of giving *one man the power* (under the oversight of the managers), and charging him with the responsibility of the whole establishment.”—LATE DR. LUTHER V. BELL (1841), formerly *Sup’t McLean Asylum, Mass.*

"It is curious how tenaciously the Retreat has clung to the old English system, while it has been almost entirely abandoned in England, and was never introduced into this country except at Hartford and Bloomingdale \* \* \*. So surely as any plan of independent, divided power is introduced, just so surely will the result be collision and mutual distrust \* \* \*. The doctrine I inculcate was many years ago recognized and formally embodied in several propositions, by the superintendents of hospitals, at their meeting in Baltimore, in 1853."—DR. ISAAC RAY, *Ex-President Association of Superintendents.*

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"In Great Britain \* \* he (the superintendent) has supreme control of the asylum over which he presides, and nominates his assistants and other officers. Harmony is the result of this system" \* \* \*. —DR. E. T. WILKINS, *Commissioner in Lunacy for the State of California,—Report, 1871.*

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"The physician should be invested with an authority from which no person can escape."—ESQUIROL.

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"To say that the efficient and prompt co-operation of any class of assistants, in a work requiring so much pains-taking, self-denial and discretion, can be certainly and effectively secured by any other relation of those

engaged in it than the strictest subordination, in every detail and particular of all associated with the superintendent to the superintendent—of all others to *one head*, and the head to itself—is, it seems to me, to ignore all the experience of mankind under similar circumstances.”—DR. C. H. NICHOLS, *Sup't Government Hospital for the Insane, Washington, D. C., and President Association of Superintendents.*

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“The superintendent *must* and will be anxious to nominate acceptable persons, and these may be rejected or deposed at will by the board.”—DR. EDW. COWLES, *Sup't City Hospital, Boston, Mass.*

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“I think there can be no question of the propriety of the rule adopted by the Association of Superintendents \* \* \*. There ought not, at least, to be two separate and independent heads, the one medical and the other non-medical.”—DR. P. S. CONNER, *Prof. Surgery, Ohio Medical College.*

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“The more I reflect on the question, the more I wonder at any board of trustees ever doubting on the subject. *One man*, in whom they have *perfect confidence*, should be *supreme* within the walls of an asylum for the insane.”—DR. HENRY I. BOWDITCH, *Boston, Mass.*

"The Superintendent is regarded as *the only responsible head* of the institution, and is held responsible for the good behavior and efficiency of all the officers. For fifty years these rules have been observed in the management of this asylum, and all moves smoothly, with no clashing."—DR. GEORGE F. JELLY, *Sup't McLean Asylum, Mass.*

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"The Superintendent should not be restricted in his power to select and nominate those who are to aid him in the administration of the institution. He should also have the power to change, discharge, or appoint his assistants, according to his judgment, and subject only to the advice of the Board of Trustees \* \* \*. There should be *one controlling, responsible head*. Thus only can harmony of action be secured, and the highest interests of an asylum be promoted. Perfect system and order are the first law of an institution, and to this anything like conflicting authority must inevitably prove fatal."—DR. J. W. BARSTOW, *Sup't Sanford Hall, Flushing, L. I.*

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"All controlling power being vested in the Board of Directors, in my opinion that power can be most effectually and happily exercised over the varied operations of an institution through a single organ, the Superintendent \* \* \*. He should be the *single responsible head* \* \* \*. I believe that by this method the Board of Directors can secure the ends of their organ-

zation much more successfully, and with much less friction, than by the creation of heads of departments independent of the Superintendent."—DR. J. V. BANCROFT, *Sup't New Hampshire Asylum.*

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"I cannot better answer your letter than by sending you, with my entire concurrence therein, a letter I have received from the medical director of the division, Surgeon W. J. Sloan, an officer of great experience \* \* \* ." —IRWIN McDOWELL, *Maj.-Gen. Headquarters Division of the South, Louisville, Ky.*

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"The code adopted by the American Association of Superintendents of Insane Asylums, by which the sole control of these institutions is given the Superintendents, subject only to the action of the Directors, is, I think, in strict accordance with the spirit of the age." —WM. J. SLOAN, *Surgeon and Medical Director Division of the South, Louisville, Ky.*

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In view of the short time at my disposal, I cannot do more than attempt to show that the vote of the gentlemen of the Board of Directors to take measures "to consider the advisability of future revision of the By-Laws" was eminently justified by circumstances.

I have, therefore, the honor respectfully to request that a committee of at least five gentlemen be appointed to consider the question, and that the working

of various Asylums for the Insane be examined into, both by correspondence and by personal visitation, as far as possible.

Before this Committee, as time permitted, I might bring other facts bearing on the matter, which cannot now be referred to for lack of time.

I would respectfully ask that ample time be taken to discuss the subject, and to allow all evidence to be brought to bear on the matter that its importance justifies.

Very respectfully,

Your obedient servant,

JAMES H. DENNY,  
*Superintendent Retreat for the Insane.*



# ORGANIZATION

AND

## General Arrangements

OF

# Hospitals for the Insane.

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EXTRACTS FROM THE

"Construction and Organization of Hospitals for the Insane,"

BY

THOMAS S. KIRKBRIDE, M. D.

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HARTFORD, CONN.:

1873.



ORGANIZATION AND GENERAL ARRANGEMENTS  
OF  
Hospitals for the Insane.

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"Important as it is in every point of view that the buildings intended for the custody and treatment of the insane should be constructed in the best manner, and furnished with every convenience calculated to promote the comfort of the patients and to facilitate their management,—still all these will result in comparatively small benefit to the afflicted, unless the system of internal organization and the general arrangements are based on correct principles and carried out with judicious liberality.

Upon most of the prominent points connected with this subject, there is believed to be nearly entire unanimity of sentiment among those who have charge of the Hospitals for the Insane in the United States, so that in expressing my own opinions on a large part of them, I have little more to do than to record the convictions which have been forced upon a majority of those who have had opportunities of testing practically the actual requirements of this class of institutions.

During a somewhat protracted connection with Hospitals of this kind, it has been my good fortune to be associated with Boards of Managers, and with assistant officers, whose views have so generally harmonized with my own, that our intercourse has always been of the most agreeable kind, and my suggestions have ever received that prompt and liberal consideration which leaves me no cause for complaints. For these reasons, as well as from a feeling that my period of service in the cause has been nearly as much protracted as can reasonably be required of one individual, and not knowing of any favors I am likely to have to ask for myself in the future, and being quite sure I have no past wrongs to redress, I shall deem myself at liberty to speak with entire freedom on this subject, without being chargeable with the slightest indecency, or of being influenced by personal considerations,—as much so as though I neither had, nor expected to have, any connection with such an institution. My only motive is to be useful to the insane and the community, to save Boards of Trustees or Managers the trouble and disappointment of resorting to experiments which have been tried over and over again, and always with bad results, and to enable those who take charge of new Hospitals to begin under circumstances that will allow them, from the start, to devote themselves to the welfare of their patients, and thus show the public how much good these institutions are capable of effecting.

**OFFICERS.**—The officers of a Hospital for the Insane should consist of a Board of Trustees or Managers, as they may be called, and a Treasurer,—of a Physician

in Chief, of one or two Assistant Physicians, according to the number and kind of patients under treatment, and of a Steward and Matron.

**TRUSTEES.**—The general controlling power over such a hospital should be vested in the Board of Trustees, whose mode of appointment will necessarily be varied according to the character of the institution with which they are connected. In private charitable corporations they will be chosen according to the prescribed forms, by those duly qualified to vote,—while in State institutions their appointment will generally be either by nomination made by the Governor, and confirmed by the Senate, or they will be selected directly by the Judges of the Supreme or other Superior State Court. The precise mode of election, however, is not of so much importance as the kind of men who are chosen, and that a determination should exist to prevent every thing like personal or political influences controlling their appointment.

The number composing this Board should never exceed twelve, while nine will often be preferable. Their tenure of office should be so arranged, that if changes are deemed desirable, the terms of only a limited number should expire in any one year. Every one nominated for such a post, should possess the public confidence in a high degree, be distinguished for liberality, intelligence and active benevolence, be a man of business habits, and able and willing faithfully to attend to the duties of the station.

The Trustees will have the general supervision of the institution and of its affairs, and they should at fre-

quent stated intervals, either as a Board, or by Committees, make visits through every part of the Hospital, and exercise so thorough an oversight of its expenditures and of its operations generally, as will tend to secure the confidence of the whole community, and especially of those whose friends are committed to its charge.

One of the most important duties connected with the trust of these officers will be the appointment of the Physician to the institution, and on his nomination, and not otherwise, suitable persons to act as Assistant Physicians, Steward and Matron.

The members of a Board of Trustees, performing their duties properly, are always able to exercise a most important influence on the prosperity of any institution, and in the welfare of its inmates; and they may also by injudicious measures, or a want of interest in its affairs, produce effects of an entirely different character. While giving the strictest attention to their own appropriate functions, they should most carefully avoid any interference with what is delegated to others, or meddling with the direction of details for which others are responsible. Especially should they avoid any personal interest in subordinates that might lead them to a course that would weaken the authority of the principal of the institution. It would, indeed, be a safe principle to adopt, that there should be no ties of a personal or pecuniary character between a member of the Board of Trustees and those who are employed in any of the departments of an institution, which could at any time prevent an unbiased judgment in a case

of difficulty. Under no circumstances should a Trustee so far forget the proprieties of his station, as to resort to subordinates for information that should come from the principal,—or to circulate unfavorable reports in regard to the institution, without having first informed this officer of their existence and tendency, and learned from him their truth or falsehood, as well as the reasons which may have induced acts, which, although correct in themselves, might, without proper explanation, be readily so misunderstood as to do great injustice to innocent parties.

Boards of Trustees, while exercising the strictest honorable scrutiny of their officers, should be prepared, on every proper occasion, to give them a steadfast support in the performance of their arduous and responsible duties. They can thus add most essentially to their power of doing good. It is a great encouragement to those who are engaged in this vocation to find their efforts properly appreciated by those to whom they are directly responsible, and who ought to be most familiar with their modes of management and the beneficial results of their labors.

It is scarcely necessary to say that it is quite inadmissible for Trustees to have an interest, directly or indirectly, in any contract with which the Hospital is concerned. Such a course may at least lead to suspicions, the existence of which, however groundless, is always to be deprecated, and might under some circumstances prevent a trustee from acting honorably and impartially.

Boards of Trustees should perform their duties with-

out compensation, but the expenses actually incurred should be returned to them.

**TREASURER.**—The Treasurer should be a salaried officer, elected by the Trustees, and giving ample security for the faithful performance of his duties. He must reside in the vicinity of the hospital, but not in it; he should collect all monies due the institution, and should receive, hold and disburse all the funds that may come under the control of the Trustees.

He should pay the orders of the Steward only when accompanied by bills of particulars, specifying the object of the payment, and certified by the Superintending Physician as being correct, and approved of by him.

**PHYSICIAN.**—<sup>c</sup> The Physician should be the Superintendent and Chief executive officer of the establishment. Besides being a well educated physician, he should possess the mental, physical and social qualities to fit him for the post. He should serve during good behavior, reside on, or very near the premises, and his compensation should be so liberal as to enable him to devote his whole time and energies to the welfare of the hospital. He should nominate to the Board suitable persons to act as Assistant Physician, Steward and Matron. He should have entire control of the medical, moral, and dietetic treatment of the patients, the unrestricted power of appointment and discharge of all persons engaged in their care, and should exercise a general supervision and direction of every department of the Institution.'

It will readily be seen how important is the task of

selecting an individual to fill the place, and to perform the duties detailed in the foregoing paragraph, which is in the exact words of the proposition adopted by 'the Association of Medical Superintendents of American Institutions for the Insane.' When once chosen, however, there would seem to be no doubt but that his tenure of office and his compensation should both be such that a man of proper character would be willing to lay aside all other engagements, to enable him to devote himself to the performance of his duties. Without good reason to expect the situation to be permanent and the compensation liberal, no man possessing the requisite qualifications and talents could be expected to give up his prospects of advancement in other branches of the profession, and so completely to cut himself off from the lucrative results of a successful general practice.

Where it is possible to find a physician who has already acquired a practical knowledge of the details of hospital management and treatment, by personal observation and a residence in some good institution, if joined with the other desirable qualifications, there is no question but that such an individual is preferable to any other. If the Physician chosen, however, has not had these advantages, he should be one that is 'apt to learn,' and willing to embrace every possible opportunity to make up his deficiencies, especially by a temporary residence in some such institution, before venturing to take charge of his own. A few weeks thus passed in Hospitals of the best kind, and devoted to a careful study of their varied arrangements, and of their

modes of managing the insane, will save a Superintendent a great amount of subsequent labor and anxiety, and result most advantageously to his first patients.

If the person chosen to occupy the post of Physician-in-Chief is practically familiar with Hospitals for the Insane, and has a taste for the details of building arrangements, very great advantage will result from his appointment being made before the commencement of the buildings, and thus securing to the Institution the benefit of his experience in arranging the different parts of the structure.

It would seem to require but little argument to show that a Hospital for the Insane should have but one official head,—in reality, as well as in name,—to whom every one employed about it must be strictly subordinate. It would be as reasonable to suppose that a proper discipline, or that good order would prevail in a ship with two captains, or in an army with two generals-in-chief, or in a school with several principals, as to expect to find them in a Hospital of the kind referred to, where two or more individuals were acting independently of all others, or in which there were certain officers over whom the Physician-in-Chief had no control. If such an arrangement ever worked well anywhere, it must have been owing to some very peculiar mental organization in those acting under it, and not because the principle was not radically wrong.

The very peculiar character of a majority of the patients received in such institutions, the numerous body of assistants required in their care, the large number of persons employed in the various departments,

the necessity for active and unceasing vigilance, joined with gentleness and firmness in all our intercourse with the mentally afflicted, and for prompt decisions in cases of difficulty, render it indispensable,—if we wish the best results,—that a large amount of authority should be vested in the chief officer.

It must always be borne in mind that every department of a Hospital for the Insane, its farm, and garden, its pleasure grounds, and its means of amusement, no less than its varied internal arrangements, its furniture, its table service and the food, the mode in which its domestic concerns are carried on, every thing connected with it, indeed, are parts of one great whole, and in order to secure harmony, economy, and successful results, every one of them must be under the same general control. It is not to be supposed that the Chief Physician of the Institution should personally superintend all or a majority of these matters, or fritter away his time in a constant attention to their details, or even that he should be proficient in every one of them; but it should be expected that he is so constituted, mentally and physically, as to be able and willing to make himself familiar with all of them, so far at least, as to know when every thing is in good order, and when all duties are properly performed. He should especially have that kind of tact and judgment that will enable him to fulfill efficiently one of the most important functions of his office, that of selecting individuals for every department fully qualified to perform their appropriate duties.

It is a great error to suppose that there is any detail

about the management of a Hospital for the Insane, beneath the dignity or unworthy the attention of its Chief Medical Officer. Every thing that has any relation to the patients,—and every thing has some direct or indirect connection with them,—may have an influence not readily appreciated by a careless observer, and to preserve unity of purpose nothing should be arranged or changed without consultation with the head of the establishment.

The Physician, who voluntarily confines his attention to the mere medical direction of the patients, must have a very imperfect appreciation of his true position, or of the important trust confided to him. He becomes in reality, a very secondary kind of officer, and his functions will be pretty sure to be considered by many around him as quite subordinate in importance to those of some others concerned in the management of the establishment, which under such an arrangement can hardly attain, or keep a permanently high character.

No one will deny that the arrangement recommended,—which is the only one that can be relied on to work satisfactorily,—places much power in the hands of the Chief Physician, but it must be remembered too that on him the responsibility also mainly rests. A man to whom this amount of power cannot be safely intrusted, certainly is not the proper person to be placed at the head of an institution containing 250 insane patients.

The simple possession of adequate authority by the chief executive officer of such an institution, often prevents the necessity for its being exercised. It may be unseen and unfelt, and yet a knowledge of its existence

will often alone prevent wrangling and difficulties in the household, and secure regularity, good order and an efficient discipline about the whole establishment.

The long continued and uninterrupted performance of the duties of a Hospital Superintendent among his patients is a tax upon the mental energies, and ultimately upon the physical powers of an individual, not easily appreciated by those who have not had some experience of the kind; and one of the best modes of counteracting these effects, is for that officer to devote a portion of his time to the supervision of out door affairs. By this means, he will not only have the invaluable advantages of active muscular exercise in the open air, but also a kind of occupation for the mind that will, more effectually than any other, divert it from the train of thought which had been induced by a protracted visit through the wards. Change of occupation,—both mental and physical,—is the relaxation of a Superintendent of a Hospital for the Insane, and is indispensable, if he expects for any long period to preserve his health and usefulness. So many noble spirits in our own country have already broken down, while engaged in the zealous performance of these duties, that hardly a better contribution could be made to the cause, or one that would more subserve the interests of the afflicted, than that which would aid in preserving the mental and physical health of the right kind of Hospital Physicians.

The nomination of the Assistant Physicians, Steward and Matron, by the Physician, will probably secure harmonious action between these officers, in the operations

of the house. This point is one of great importance, and without it there can be little satisfaction in the management of an institution. No Board of Trustees having at heart the prosperity of a Hospital for the Insane, could be willing to select or retain in office any of these named, who did not cordially aid in promoting the views and carrying out the plans of the chief executive officer.

In reference to all other persons employed about the patients, the *power of appointment and discharge*, as before observed, should be clearly and unconditionally with the Physician. A single interference with this power could hardly fail to lead to acts of insubordination, and a disregard of the proper authority, and prove to a greater or less extent destructive of all good discipline.

**ASSISTANT PHYSICIANS.**—Assistant Physicians, besides being graduates of medicine, should be men of such character and general qualifications as will render them respected by the patients and their friends, and able to represent creditably, or to perform efficiently, the more ordinary duties of the Physician, in his absence. As considerable responsibility will frequently rest on these officers, much more than simple medical attainments should be regarded in making a selection. It would be to the ultimate interest of the afflicted, and of the whole community, if the post could generally be conferred on those who are likely to devote themselves to this branch of the profession, and who seem to possess the kind of character, which in due time, would probably make them desirable Chief Officers of Hospi-

tals for the Insane. They should especially be men of the highest moral character, of a cheerful disposition, but clear of frivolity of behavior, and above all, they should be likely to be prudent in their intercourse with the patients. Although it must be acknowledged that some men make admirable Assistants, who are not so well calculated for Superintendents, still it does not often, if ever, occur that a poor assistant makes a good Chief Medical Officer.

STEWARD.—The duties of the Steward, and the importance of the office, vary materially in the different American institutions. In some, he not only performs the ordinary functions of that officer, but is also really the Treasurer of the institution, and receives and disburses large sums of money. The present essay, however, referring more particularly to State institutions, or those similarly constituted, the duties last named will be understood to be performed by the Treasurer, as an officer of the Board of Trustees, and whose duties have already been detailed.

The details of the duties of both Steward and Matron, with the sanction of the Board of Trustees, should be arranged by the Physician, to which officer they should be directly responsible.

The Steward, under the direction of the Physician, should make all purchases for the institution, keep the accounts, make engagements with, pay and discharge those employed about the establishment, and besides having a care of the farm, garden and grounds, should be able to perform many other important duties of supervision and police, that may with propriety be as-

signed him. He should give adequate security for the faithful performance of his trust; he should promptly pay into the hands of the Treasurer all monies received by him on account of the institution, and should settle all demands,—except trifling incidental ones, for which he should regularly account,—by orders on the Treasurer, with bills of particulars, duly approved by the Physician.

MATRON.—The Matron, while having a general supervision of the domestics and of the domestic arrangements of the house, will also be able, under the direction of the Physician, to contribute essentially to the comfort of the patients, and all others about the establishment. Although the Matron will have considerable intercourse with the patients, her principal and most important duties will be more connected with the housekeeping, while the general supervision of the patients, their instruction, amusement and immediate care will be directly and mainly confided to others, to be hereafter referred to.

Some able hospital physicians amongst us have proposed having no Steward or Matron, but this suggestion, I presume, has arisen from the difficulties which in some sections of the country have so frequently occurred with these officers, and which have, no doubt, originated from improper persons having been selected for these stations, from their precise duties not having been accurately defined, or their subordination to the principal not being well understood, and, it must also be added, occasionally from the very injudicious interference of Trustees, where difficulties have arisen between

them and the Physician. Whether a Steward and a Matron are among the officers of such an institution or not, the duties commonly assigned them have to be performed by some individuals, whether acting under these or different titles. The terms used above are familiar to every body, and although those acting in these offices occasionally may not have correctly appreciated their true position, still I should scarcely deem it necessary, on that account, to reject these titles altogether. My own experience with Stewards and Matrons has been so fortunate as to cause me to remember only their valuable services, and a pleasant official intercourse with them.

The individuals thus far named, are officers that can not be dispensed with, and are either appointed directly by the Board of Trustees, or on the nomination of the Physician. No reference, however, has been made to Chaplains or to Consulting Physicians, all of whom are occasionally deemed desirable. If either are appointed, it should be by the Board of Trustees on the nomination of the Physician.

**CHAPLAIN.**—In reference to the propriety of making the Chaplain a permanent officer, considerable diversity of opinion still exists among hospital physicians, the varied circumstances of different institutions leading their superintendents to contrary conclusions on the subject.

The value of such an officer must depend almost entirely on the character of the individual selected, and the sound judgment and discretion with which he performs his duties. Under all circumstances, I have no

doubt but that it will be found best that he should not be a resident of the institution. In addition to this, it may be sufficient to quote the language adopted by 'the Association of Medical Superintendents of American Institutions for the Insane,' viz: 'If a chaplain is deemed desirable for a permanent officer, he should be selected by the superintendent, and, like all others engaged in the care of the patients, should be entirely under his direction.'

**SUPERVISORS.**—There should be one Supervisor of each sex, and each of these should exercise a general oversight of all the patients and their attendants on one side of the house, and thus form a medium of communication between them and the officers of the institution. These individuals being exempted from the ordinary work of the wards, and their duties being extended through all the apartments and grounds occupied or used by their own sex, will have great facilities for ascertaining the mode in which prescriptions and directions are carried out, and the patients' comforts and general condition are attended to. They should be persons who possess in a high degree, tact, intelligence, activity, and above all, true benevolence, with a feeling of sympathy and kindness for all the afflicted. They should be able to appreciate the views and wishes of the Physician, and in all their intercourse with the insane, or those employed in their care, should act with such coolness and prudence under all circumstances, as to command their respect, and to impress upon them by word and deed, the great importance of a kind and enlightened course of treatment.

ATTENDANTS.—The proper selection of attendants is one of the many important duties to be performed by the Physician, and it should be the earnest desire of every governing Board to sanction all regulations that tend to secure to an institution a class of persons whose services are particularly desirable, and who seem from their natural character and their education to be specially qualified for such a post. With all the supervision that can be given, the comfort of the patients in every Hospital for the Insane is essentially dependent on their attendants.

The duties of attendants, when faithfully performed, are often harassing, and in many of the wards, among excited patients, are peculiarly so. On this account, pains should always be taken to give them a reasonable amount of relaxation, and their position should, in every respect, be made as comfortable as possible.

SUPERVISION OF HOSPITALS FOR THE INSANE.—The best kind of public supervision for a hospital for the insane—that which will tend most effectually to prevent abuses of any kind, to secure good management, an economical administration of its affairs, and the humane and enlightened treatment of all its patients, will be found to be the regular visitations, at short intervals, of a committee from a well constituted Board of Trustees or Managers. Such individuals being men of benevolence, high character and intelligence, serving without compensation, and having no motive in giving their time and attention to the work, but a desire to promote the best interests of the afflicted, forms the surest guarantee to the public that no just complaint

will pass without investigation, and no actual wrong go unredressed; while the frequent examination of the expenditures and the finances generally, will be the most effectual mode of securing a strictly wise and liberal economy in every department.

A permanently constituted Board of Trustees, or one not changed in a body, soon acquires a knowledge of the details of such an establishment that cannot be possessed by a new set of men, and for this reason the visits from an intelligent board are much more likely to be thorough and useful than those made by persons who are comparatively strangers.

The only other kind of inspection of Hospitals for the Insane that is likely to be at all valuable, would be that made by a commission composed in part, at least, of men practically familiar with the whole subject, and whose members should have characters so well established as to command the public confidence in their statements and recommendations. Where many private institutions exist, such a commission would seem to be especially desirable, and their visits could hardly prove unacceptable anywhere, if matters are properly managed.

The visits of large bodies, like grand juries, as commonly constituted, without any practical or professional knowledge of the subject, although it might gratify a certain kind of curiosity, could hardly be productive of any good result either to the public or an institution, for their interests are entirely identical. The want of familiarity with the details of such establishments, of the peculiarities of mental disease or the best modes of

treating it, would prevent such a body from making valuable suggestions; while the presence of so large a number of strangers in the wards at one time, might prove detrimental, and would certainly be objected to by many patients.

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#### PROPOSITIONS RELATIVE TO THE ORGANIZATION OF HOSPITALS FOR THE INSANE.

I. The general controlling power should be vested in a Board of Trustees or Managers; if of a State institution, selected in such manner as will be likely most effectually to protect it from all influences connected with political measures or political changes; if of a private corporation, by those properly authorized to vote.

II. The Board of Trustees should not exceed twelve in number, and be composed of individuals possessing the public confidence, distinguished for liberality, intelligence, and active benevolence, above all political influence, and able and willing faithfully to attend to the duties of their station. Their tenure of office should be so arranged that when changes are deemed desirable, the terms of not more than one-third of the whole number should expire in any one year.

III. The Board of Trustees should appoint the Physician, and, on his nomination, and not otherwise, the Assistant Physician, Steward and Matron. They should, as a board, or by committee, visit and examine every part of the institution at frequent stated intervals, not less than semi-monthly, and at such other

times as they may deem expedient, and exercise so careful a supervision over the expenditures and general operations of the hospital, as to give to the community a proper degree of confidence in the correctness of its management.

IV. The Physician should be the Superintendent and chief executive officer of the establishment. Besides being a well educated physician, he should possess the mental, physical and social qualities to fit him for the post. He should serve during good behavior, reside on or very near the premises, and his compensation should be so liberal as to enable him to devote his whole time and energies to the welfare of the hospital. He should nominate to the board suitable persons to act as Assistant Physician, Steward and Matron. He should have entire control of the medical, moral, and dietetic treatment of the patients, the unrestricted power of appointment and discharge of all persons engaged in their care, and should exercise a general supervision and direction of every department of the Institution.

V. The Assistant Physician, or Assistant Physicians, where more than one are required, should be graduates of medicine, of such character and qualifications as to be able to represent and to perform the ordinary duties of the Physician during his absence.

VI. The Steward, under the direction of the Superintending Physician, and by his order, should make all purchases for the Institution, keep the accounts, make engagements with, pay and discharge those employed about the establishment; have a supervision of the farm, garden and grounds, and perform such other duties as may be assigned him.

VII. The Matron, under the direction of the Superintendent, should have a general supervision of the domestic arrangements of the house ; and, under the same direction, do what she can to promote the comfort and restoration of the patients.

VIII. In institutions containing more than two hundred patients, a second Assistant Physician and an Apothecary should be employed ; to the latter of whom other duties, in the male wards, may be conveniently assigned.

IX. If a Chaplain is deemed desirable as a permanent officer, he should be selected by the Superintendent, and, like all others engaged in the care of the patients, should be entirely under his direction.

X. In every Hospital for the Insane, there should be one supervisor for each sex, exercising a general oversight of all the attendants and patients, and forming a medium of communication between them and the officers.

XI. In no institution should the number of persons in immediate attendance on the patients be in a lower ratio than one attendant for every ten patients ; and a much larger proportion of attendants will commonly be desirable.

XII. The fullest authority should be given to the Superintendent to take every precaution that can guard against fire or accident within an institution, and to secure this an efficient night-watch should always be provided.

XIII. The situation and circumstances of different institutions may require a considerable number of per-

sons to be employed in various other positions ; but in every hospital, at least all those that have been referred to, are deemed not only desirable but absolutely necessary, to give all the advantages that may be hoped for from a liberal and enlightened treatment of the insane.

XIV. All persons employed in the care of the insane should be active, vigilant, cheerful, and in good health. They should be of a kind and benevolent disposition ; be educated, and in all respects trustworthy ; and their compensation should be sufficiently liberal to secure the services of individuals of this description.







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